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ABSTRACT

This study examined the types of activities offered through Girl Neighborhood Power (GNP) and the extent to which low-income girls reported positive experiences and outcomes related to psychological, social, behavioral, and academic adjustment. Four communities implemented federally funded GNP programs, which provided various activities and services to promote positive youth development through coordinated community efforts of multiple local agencies. Components included health education, health care access, adult mentoring, before/after school activities, community service and volunteering opportunities, journaling, and career development. Activities emphasized preventing substance abuse and premature sexual activity/pregnancy, increasing knowledge and use of health care, promoting healthy behaviors, increasing knowledge about career opportunities, and building confidence in many domains. Researchers surveyed and interviewed girls, their parents, and community partners. GNP positively influenced girls' social, psychological, academic, and behavioral adjustment. Girls reported developing more social skills and self-confidence and an interest in community service. Expressing feelings through journaling helped girls handle frustration. They felt that learning not to use drugs was a very important component of GNP. GNP helped girls learn how to live healthy lives. Community partners perceived GNP as a valuable out-of-school program. (Contains 24 references.) (SM)

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The National Study of Girl Neighborhood Power: An Out-of-School Program for Girls Ages 9 to 14

Janine M. Zweig
Asheley Van Ness

The Urban Institute

Final Report
October 2001

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EXECUTIVE SUMMARY

PURPOSE

In 1997, the US Department of Health and Human Services, Human Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health launched the Girl Neighborhood Power (GNP) initiative. This national initiative was designed to address the unique needs of girls ages 9 to 14 by supporting communities in building programs that foster healthy behaviors and create meaningful community participation for girls. GNP programs provide out-of-school activities and services for girls living in low-income neighborhoods.

Although over the last decade some indicators for girls have been positive including progression on measures of reading and math achievement and the steady decline of the teen birth rate, girls today (Lindberg, Boggess, & Williams, 1999; Phillips, 1998):

- are more likely to smoke than in the past;
- are more likely than boys to be depressed, have eating disorders, and be suicidal;
- have inadequate access to sports programs offering physical, social, and psychological benefits; and
- are more likely than boys to be victims of violence, especially sexual violence.

In addition, youth ages 10 to 14 are experiencing more autonomy and freedom than ever before, but are still of an age when they need special guidance and support (Carnegie Council on Adolescent Development, 1995).

The current study was designed to examine the types of activities that are being offered through GNP and to determine if GNP assists girls in living healthier lives. The study includes both qualitative and quantitative methodologies. It examined the extent to which girls reported positive experiences with GNP and outcomes related to psychological, social, behavioral, and academic adjustment.

Over 90 percent of girls reported having two or more adults who provided them with emotional support and instrumental support, meaning they had adults in their lives who could offer advice, help during emergencies, provide positive attention, and help with schoolwork.

WHO, WHAT, WHERE, AND WHEN?

Four communities from across the United States were selected to implement federally-funded GNP programs through 2002 — Madison, Wisconsin; Memphis, Tennessee; Rapid City, South Dakota; and York, Pennsylvania. These community grantees, the programs they provide, and the effect of the programs on the participants are the focus of the current study.

A fifth federally-funded GNP partner is the National Healthy Mothers, Healthy Babies Coalition. This grantee was funded to build a National Consortium of GNP Partners. The consortium includes Federal, State, and local government representatives, professional organizations, community groups, foundations, media, and corporate leaders. The purpose of the consortium is to guide the GNP programming initiative and build national support and commitment to programming for girls ages 9 to 14. It provides an opportunity for constituents to share knowledge, advise grantees, and secure resources for GNP.

During focus groups, girls reported that the staff was one of the most important parts of the GNP program and one reason they came back to GNP day after day.

GNP programs provide a number of activities and services to promote positive youth development through the coordinated community efforts of multiple local agencies. These program elements include health education and access to health care, mentoring, before/after school activities (i.e., recreation, sport, cultural enrichment), opportunities for community service and volunteering, journaling, and career development. GNP after-school, evening, weekend, and summer programs place special emphasis on:

- preventing substance use;
- preventing premature sexual activity and pregnancy;
- increasing girls' knowledge and use of health care;
- promoting healthy behaviors including nutrition;
- increasing girls' knowledge about career opportunities; and
- building girls' confidence in academics, sports, and other domains.

GNP assists girls in increasing their self-confidence. During a focus group, one girl said, "nobody can tell me what I can and cannot do. Nobody can talk about me or say anything bad about me without me having confidence in myself."

Community grantees were required to provide community service opportunities for girls, as well as at least two other program elements selected from the following choices: mentoring, before/after-school activities, health education, and career development. Journaling was also an optional activity, but girls were encouraged to participate in journaling, which helped to capture their GNP experience. This approach gave grantees flexibility in developing programming specific to their community's needs and issues while at the same time retaining common program strategies across communities. Community grantees were expected to support a range of activities and services for girls ages 9 to 14 by building partnerships with agencies focusing on youth development and recreation, health, education, mental health, substance use, social service, and justice and law enforcement. In addition, community grantees were expected to increase their operating budgets for GNP by 25 percent for each year of programming using matching funding and resources.

GNP was a source of friendship for girls. One girl reported, "the girls that are a part of [GNP] now... befriended me when nobody else would."

The study was conducted during the fourth year of GNP programming and includes two assessments from that year of programming. Starting the study during the fourth year of programming allowed community grantees time to establish GNP programs and time for the programs to mature in communities. Common barriers encountered when starting programs had been overcome and each community grantee had GNP programs that were fully functional. The timing of Wave 1 and Wave 2 assessments corresponded with the academic year when community grantees' after-school programming began and ended.

About two-thirds of the girls reported being socially competent and being able to find ways to help people end arguments, listen carefully to what others say, work with other children, help people when they are in need, and find ways to solve problems.

Quantitative data were collected during both Wave 1 and Wave 2. Girls and their parents both completed survey instruments. Qualitative data were collected at Wave 2 during focus groups. Four focus groups were conducted per community including: (1) girls ages 9 to 11, (2) girls ages 12 to 14, (3) parents of GNP participants, and (4) GNP direct program staff.

During Wave 1, 284 girls completed surveys. During Wave 2, 202 girls completed surveys, which is 71% of the original sample. Based on analyses comparing girls who remained in the study and those who left the study, it appears that attrition did not introduce observed bias into the sample. Only 108 parents completed surveys during Wave 1 and 121 did so during Wave 2, 38 percent and 43 percent of the sample respectively. Across the four community grantees, 29 girls ages 9 to 11 and 31 girls ages 12 to 14 participated in focus groups during Wave 2. Nineteen GNP direct program staff and 31 parents of GNP girls also participated in focus groups.

KEY FINDINGS

Girls in focus groups reported important aspects of GNP were getting to know their community more, developing leadership skills, and providing community service.

Although some mixed results were found, both qualitative and quantitative results show that GNP may have positively influenced girls' social, psychological, academic, and behavioral adjustment. Qualitative information from focus groups shows that girls reported they changed in positive ways as a result of participating in GNP. They reported developing more social skills and self-confidence and developing an interest in community service activities. Girls reported finding journaling useful and a way to express themselves. To many girls, GNP is a source of adult support other than their parents, a place that provides opportunity to learn and do things

During focus groups, girls reported that one of the most important aspects of GNP was learning not to use drugs.

they would not otherwise do and to go places they would not otherwise go. Parents and GNP program staff also reported seeing positive changes in girls as a result of participating in GNP.

Many girls also reported positive levels of social, psychological, behavioral, and academic adjustment during both Wave 1 and Wave 2 survey assessments. Specifically, many girls who participated in GNP reported positive levels of social competence (interpersonal and communication skills), self-worth (acceptance of self and belief that you are as good a person as others), self-efficacy (belief in your own capability to accomplish goals), social acceptance (belief you are accepted and well-liked by peers), adult emotional support (positive attention and interaction), adult instrumental support (pragmatic help with problems or issues), and low levels of health risk behaviors (sexual activity and substance use). Girls changed in important ways during the fourth year of GNP programming. Specifically, girls reported higher levels of adult instrumental support, self-worth, and social acceptance at Wave 2 compared to Wave 1. In addition, the longer girls were exposed to GNP the higher the levels of school attendance, social competence, and adult instrumental support the girls reported. Finally, the more girls were involved with GNP the less likely they were to report some sexual activities.

These findings indicate that GNP assists girls in living healthy lifestyles and provides girls with important adult support and guidance. Having high self-worth, feeling accepted by peers, and having many adults to turn to when in need of help or advice are important indicators of positive adjustment for early adolescent girls.

During focus groups, many girls reported that one way GNP helped them was to make them feel prepared for puberty, both physically and mentally.

COMMUNITY PARTNER SURVEY DESIGN AND FINDINGS

According to the National Research Council, high-quality youth serving programs are those which see themselves as partners in a larger service delivery network (National Research Council and Institute of Medicine, 2000). One objective of GNP is to create a collaborative of agencies within the community's service network to provide activities and programs that meet the needs of girls ages 9 to 14. Because of this, a sub-study was conducted focusing on community partners to examine the collaborative relationships GNP grantees have with other agencies within their service network. It provided an opportunity to learn about how GNP involves various community agencies in the program, how agencies interact with one another to meet the needs of girls ages 9 to 14, and whether these partnerships have met with success.

Expressing feelings through journaling helped girls to deal with frustration, calm down, and feel better.

During focus groups, girls, parents, and GNP program staff all reported that GNP provided girls with opportunities to do activities they would not otherwise have done and learn things they would not otherwise have learned.

Across the four communities, 56 organizations and agencies that work directly with GNP in some capacity completed the Community Partner Survey. The types of organizations represented included general youth serving organizations, nongovernmental community service organizations, faith-based organizations, health agencies, schools, and others.

Overall, the community partners who completed the survey perceived the GNP program as a valuable out-of-school program. Based on the survey responses, the community partners reported meaningful interactions with the GNP program such as strategizing together about approaches to reach out to girls and about new and creative ways to provide programs for girls, collaborating on special events, and referring girls to GNP. Most partners (95 percent) also indicated that GNP is a necessary partner in providing effective services and programs. Despite some barriers to working with the GNP program (for example, funding issues and staff turnover), 62 percent of the community partners reported no barriers and reported positive aspects of participating in a partnership with GNP. Most partners (91 percent) felt like they were a part of a team addressing the needs of girls ages 9 to 14. Ninety-five percent of respondents reported that they felt they had been successful or very successful at building the partnership with GNP. Repeatedly, partners reported that the GNP program is essential in the community. GNP is viewed as an important program, because it is one of the few neighborhood-based programs that provides not only a safe learning environment, but also reaches out to engage young girls, adults, and agencies in its programming.

On average, girls had significantly higher levels of adult instrumental support, self-worth, and social acceptance at Wave 2 as compared to Wave 1.

Study Strengths and Limitations

The primary strength of the study is the use of both quantitative (surveys) and qualitative (focus groups) methodologies to examine how GNP assists girls in living healthy lives. Surveys included reliable and valid measures of psychological, social, academic, and behavioral adjustment, which have been used in a number of national evaluations of youth programs. Focus groups were used to help illustrate quantitative findings, as well as tap into information and concepts that were not reflected in the surveys. By using both methodologies, we are able to have a more comprehensive picture of how girls think they changed as a result of participating in the program. Another strength is that attrition between Wave 1 and Wave 2 did not introduce significant observable bias into the sample.

The more days girls attended GNP, the more they attended school and the higher they rated their social competence.

While we have learned a great deal about GNP programming from the national study, the study is limited in a number of ways that makes it impossible to assess program impacts fully. In general, it is difficult to evaluate youth development and out-of-school programming for adolescents with varying

levels of structure, form, and function (National Research Council and Institute of Medicine, 2000). The limitations include variation across communities in the structure of the program, the lack of a comparison group, occurrence of Wave 1 after many of the girls had already been participating in the programming, only two assessments (rather than multiple assessments), and self-selection into the program.

Implications for Practice

Some findings point to areas in which GNP staff can focus their attention for further programming in federally funded communities or in replication of the program in new communities. Three specific areas could be targeted to improve efforts. First, in the survey, girls reported having lower levels of autonomy and influence over GNP programming the longer they participated in the program. Girls in focus groups supported this finding by indicating they did not always want to participate in the activities GNP offered. Community grantees have worked to incorporate girls' feedback in programming and provide them with leadership and decision-making responsibilities when appropriate. Perhaps further efforts could increase girls' participation in designing programming and choosing areas of focus, especially for older girls who may have participated in the program for longer periods of time.

Second, a large number of girls reported yelling at others during both Wave 1 and Wave 2. The context in which the yelling occurs, however, is not clear. It may be that girls use yelling instead of physical fighting or that girls are yelling in order to express themselves. Although girls in focus groups reported learning conflict resolution skills at GNP, yelling seems to have remained at high levels for girls throughout the year. As a result, community grantees may want to continue to focus on programming that specifically teaches girls how to resolve conflict and deal with anger in more constructive ways.

Third, community grantees which offer GNP programming and those replicating GNP in other communities should attempt to address staff turnover within the program. GNP partners identified staff turnover as a barrier to successfully working with the program. Staff turnover interrupts the flow of programming and staff relationships with girls. Communities should consider ways to enhance staff experiences in order to increase the longevity of staff in direct service positions.

> *The longer girls participated in GNP (as measured by the number of grades they participated in GNP), the higher they rated adult instrumental support. In other words, the longer they were in GNP, the more adults they had to provide guidance, advice, and help.*

Conclusions

GNP is an out-of-school program that enriches the lives of girls ages 9 to 14. It provides girls with opportunities for growth and positive change. It assists girls living in low-income neighborhoods by providing adult supports, positive peer interaction, and

exposure to community service, career building, and knowledge they would not otherwise have. As one parent remarked, "[GNP] is a building block to make [the girls] good adults." One girl sums up much of the sentiment we heard during this study — "[GNP] is a great, great, great thing."

TABLE OF CONTENTS

CHAPTER 1: INTRODUCTION 1
Background on Girl Neighborhood Power 1
Adolescent Development and Youth Development Programming 2
GNP Structure and Programming 4
Madison, Wisconsin 5
Memphis, Tennessee 5
Rapid City, South Dakota 6
York, Pennsylvania 6
Summary 7
Structure of Report 7
CHAPTER 2: STUDY METHODOLOGY 8
Study Purpose and Research Questions 8
Study Design and Procedure 8
Outcome Measures 10
Attrition Analysis 11
Characteristics of GNP Participants 11
Conclusion 13
CHAPTER 3: PROGRAM DOSAGE AND IMPACT HOURS 15
Program Dosage 15
Program Impact Hours 16
CHAPTER 4: WHAT DIFFERENCE DOES GNP MAKE IN THE LIVES OF GIRLS? 18
Overall, GNP Girls Report Healthy Lifestyles 18
Sense of Belonging in GNP 18
Adult Emotional and Instrumental Support 19
Self-efficacy and Self-worth 20
Scholastic Competence and Academic Adjustment 20
Social Acceptance 21
Social Competence 22
Sense of Community 22
Sense of Autonomy and Influence in GNP 23
Safety at GNP 23
Substance Use 24
Yelling at Others 24
Sexual Activity 24
Other Themes from Focus Groups 25
Do Girls Who Participate in GNP Have Healthier Lifestyles After Participating in GNP Than Before They Participated in GNP? 26
Do Girls Who Participate in GNP Have Increasingly Healthier Lifestyles the Longer They Participate in GNP? 28
Conclusions 36
CHAPTER 5: COMMUNITY PARTNERS 37
Introduction 37

Study Design 37
Survey Administration for Community Partner Survey 37
Description of Questions in the Community Partner Survey 37
Sample 38
Results 39
Community Partner Involvement 39
Community Partner Interactions 39
Benefits and Barriers to Being a Partner with the Girl Neighborhood Power Program 40
Girl Neighborhood Power: Making a Difference in the Community 42
Conclusions 43
CHAPTER 6: STUDY SUMMARY 44
Positive Outcomes 44
Areas to Focus GNP Programming 45
Study Strengths and Limitations 46
Conclusion 47
REFERENCES 48
APPENDIX A: FIGURES OF COMMUNITY GRANTEE STRUCTURES 50
APPENDIX B: MEASURES IN THE SURVEY FOR GIRLS 55
Sense of Belonging in GNP 55
Safety 56
Adult Support 56
Emotional Support 57
Instrumental Support 57
Academic Performance 57
Self-efficacy 58
Self-worth 59
Scholastic Competence 60
Social Acceptance 60
Sense of Autonomy and Influence in GNP Programs 61
Sense of Community 62
Social Competence 62
Adolescent Health Risks 63
APPENDIX C: LETTER OF PERMISSION 64

CHAPTER 1
INTRODUCTION

BACKGROUND ON GIRL NEIGHBORHOOD POWER

In 1997, the US Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health launched the Girl Neighborhood Power (GNP) initiative.[1] This national initiative was designed to address the unique needs of girls ages 9 to 14 by supporting communities in building programs that foster healthy behaviors and create meaningful community participation for girls. Four communities received five years of federal funding for GNP programs in low-income neighborhoods — Madison, Wisconsin; Memphis, Tennessee; Rapid City, South Dakota; and York, Pennsylvania. Each community grantee provides programming in several sites. The GNP programs these communities provide are the focus of the current study.

A fifth federally-funded GNP partner is the National Healthy Mothers, Healthy Babies Coalition in Alexandria, Virginia. This grantee was funded to build a National Consortium of GNP Partners. The consortium includes Federal, State, and local government representatives, professional organizations, community groups, foundations, media, and corporate leaders. The purpose of the consortium is to guide the GNP programming initiative and build national support and commitment to programming for girls. It provides an opportunity for constituents to share knowledge, advise grantees, and secure resources for GNP.

GNP programs target girls living in low-income neighborhoods — girls who may be exposed to greater risks and vulnerabilities than others in the same region. GNP programs provide a number of activities and services to promote positive youth development through the coordinated community efforts of multiple local agencies. These services include health education and access to health care, mentoring, after-school activities (i.e., recreation, sport, cultural enrichment), opportunities for community service and volunteering, journaling, and career development. GNP after-school, evening, weekend, and summer programs place special emphasis on:

- preventing substance use;
- preventing premature sexual activity and pregnancy;
- increasing girls' knowledge and use of health care;
- promoting healthy behaviors including nutrition;
- increasing girls' knowledge about career opportunities; and
- building girls' confidence in academics, sports, and other domains.

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[1]Other federal agencies also contributed funding to the GNP effort including: the Office of Women's Health, the Office of the Secretary, the National Institute of Child Health and Human Development, the Centers for Disease Control and Prevention, and the Administration for Children, Youth, and Families.

Particular program elements were identified as part of the original design of GNP. Community grantees were required to provide community service opportunities for girls, as well as at least two other program elements selected from the following choices: mentoring, before/after-school activities, health education, and career development. Journaling activities were also emphasized. This approach gave grantees flexibility in developing programming specific to their community's needs and issues while at the same time retaining common program strategies across communities. Community grantees were expected to support a range of activities and services for girls ages 9 to 14 by building partnerships with agencies focusing on youth development and recreation, health, education, mental health, substance use, social service, and justice and law enforcement.

Every grantee provides girls with some homework help, snacks, and after-school activities, and conducts journaling, community service, health education, and career development activities. Journaling is a writing exercise designed to help girls reflect on their lives, relationships, and experiences and process these thoughts through written communication. Community service projects are conducted at least four times per year (for a total of at least 25 hours) and involve activities such as neighborhood clean-up, gardening/planning, community education, and hunger relief through food collection and distribution. Grantees offer health education for at least 25 program hours per year focusing on substance use, puberty, personal hygiene, referral for health services, nutrition, sexuality, sexually transmitted diseases, mental health, and sports and physical activity. They also provide career development activities for at least 25 program hours per year including exposing girls to traditional and nontraditional careers and technology, and helping girls identify their vocational interests and engaging them in related activities.

Community grantees were also expected to increase their operating budgets for GNP by 25 percent for each year of programming using matching funding and resources. Year Two required a 25 percent match, Year Three required a 50 percent match, Year Four required a 75 percent match, and Year Five required a 100 percent match. The matching funds could come from alternate non-Federal sources, including corporations, foundations, states, and local agencies. Volunteer resources and other in-kind contributions could also count toward the match.

Adolescent Development and Youth Development Programming

It is important to provide programming for young girls targeting their unique issues and concerns. Currently, many indicators of well-being are positive for girls. However, girls today are still vulnerable. Over the last decade some indicators for girls have improved including progression on measures of reading and math achievement and the steady decline of the teen birth rate (Phillips, 1998). On average girls participate in more positive behaviors than boys including school-related activities other than sports, religious activities, and family activities (Lindberg, Boggess, & Williams, 1999). In contrast, girls are more likely to smoke than in the past and are more likely to be depressed and/or have eating disorders than boys. They are more likely to have suicidal

thoughts and make suicidal attempts than boys, are more likely to be victims of violence, especially sexual violence, than boys, and have inadequate access to sports programs offering physical, social, and psychological benefits (Lindberg et al., 1999; Phillips, 1998). In addition, adolescence represents a time when youth began participating in health risk behaviors. Greater percentages of youth in ninth and tenth grades report using tobacco, alcohol, marijuana and other illicit drugs, and having unprotected intercourse than youth in seventh and eighth grades (Lindberg et al., 1999). The percentage of youth participating in physical fighting, however, decreases with increasing age during adolescence.

Research shows that as youth move from middle childhood to early adolescence they experience a decrease in self-confidence and self-esteem and an increase in anxiety (Eccles, 1999). Early adolescence is also marked by major changes for individuals with puberty, educational transitions (elementary to secondary schools), and psychological changes often occurring simultaneously. Middle childhood is a time when youth become increasingly supervised by adults other than their parents such as teachers, community group leaders, etc. (Eccles, 1999). And as youth move into adolescence their need to develop autonomy and some degree of independence increases. Currently, youth the age of GNP girls —9 to 14 years — are experiencing more autonomy and freedom than in the past and are able to spend more time with peers in unsupervised settings, but they are still at a point in there lives when they need special guidance and support (Carnegie Council on Adolescent Development, 1995; Eccles, 1999).

Given the combination of after-school time, weekends, holidays, and summer break, youth spend most of their time outside of school. Programs to fill this out-of-school time are important because much of it is spent unstructured (Future of Children, 1999). Particularly as youth move through early, middle, to late adolescence, time becomes more discretionary and less planned, leaving youth with choices about what to do with their time (Gambone & Arbreton, 1997). Out-of-school programs can facilitate youth development and help protect them against experiencing some of the problems they may encounter. Out-of-school activities based on youth development program models provide a context in which girls can learn about themselves and can experience opportunities to create their own idea of what it means to be successful (Eccles, 1999). Such programs provide a safe place for youth to develop their autonomy, build peer relationships, and develop leadership skills (Eccles, 1999). As youth begin the normal developmental task of distancing themselves from their parents in order to learn how to function more independently, such programs can provide positive adult relationships for youth who still need guidance and support. While these relationships do not replace those with parents, they are additional supports that youth need and rely on. Connections to and support from parents remain important. Recent research shows that such connection is related to less youth participation in health risk behaviors such as substance use, unsafe sexual activity, and violence (Resnick, Bearman, Blum, Bauman, Harris, Jones, Tabor, Beuhring, Sieving, Shew, Ireland, Bearinger, & Udry, 1997; Zweig, Phillips, & Lindberg, in press).

Many programs involving adolescents focus on one problem issue (e.g., substance use, teen sexuality, or pregnancy), despite evidence that suggests overlap in participation in problem behaviors, similar antecedents leading to problem behaviors, and participation in positive behaviors despite participation in problem behaviors (Brener & Collins, 1998; Carnegie Council on Adolescent Development, 1995; Catalano, Berglund, Ryan, Lonczak, & Hawkins, 1999; Lindberg et al., 1999; Zweig, Lindberg, & McGinley, 2001). Efforts in the 1990s, of which GNP is one, began to emphasize youth development models which address many adolescent concerns through one program and focus on enriching the lives of youth beyond preventing problem behaviors (Catalano et al., 1999). Youth development models, in general, promote caring and supportive relationships, self-determination, self-efficacy, belief in the future, and social, emotional, behavioral, cognitive, and moral competence. The basic guiding principle is to build on youth's strengths and focus on skill and competence (National Research Council and Institute of Medicine, 2000).

Youth development models range from structured programs with specific curricula to less structured programming, such as after-school activities that are mostly recreational. GNP is a youth development model that incorporates a range of programming. GNP provides recreational out-of-school activities for girls ages 9 to 14 and also provides unique structured programming for girls which addresses their developmental needs. GNP grantees do not follow standard curricula, but each community has the same program goals, objectives, and approaches. They all promote youth development and focus on enriching girls' lives through a number of programming strategies, including structured educational activities around particular themes (for example, health and sexuality, nutrition), journaling, mentoring, community service, and recreation. They focus on creating supportive environments that expose girls to experiences they may not otherwise have (for example, trips to museums and theaters), and that allow girls to try new opportunities, develop new skills, develop relationships with peers and adults other than their parents, and learn leadership skills, which is an important aspect of the girls' growing maturity (Eccles, 1999). GNP also builds partnerships with community agencies to develop a comprehensive set of activities and services for girls, which is recommended by the National Research Council's Board on Children, Youth, and Families, Committee on Community-level Programs for Youth (National Research Council and Institute of Medicine, 2000).

GNP Structure and Programming[2]

GNP programs have been in four federally-funded communities since 1997. Each community grantee has a different structure but provides similar program elements built around common themes of fostering healthy development and enriching girls' lives. The specific grantees' structures and programming strategies are described in the sections below.

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[2] Site descriptions are based on a previous document: Zweig, J. M. (2000). *Girl Neighborhood Power Site Visits Report*. Washington, DC: The Urban Institute (unpublished report).

Madison, Wisconsin

The City of Madison's Office of Community Services is the community grantee and subcontracts with community center sites to provide programming to girls. The Madison GNP has five sites at independent youth-serving community centers (see Appendix A, Figure 1): (1) Allied Drive, (2) Black Hawk Council of Girl Scouts, (3) Vera Court Neighborhood Center, (4) Atwood Community Center, and (5) Kennedy Heights Community Center.

Each site has programming at least two days a week — with some providing programs five days a week — focusing on particular age groups. For example, Atwood Community Center provides programming four days a week; two days for younger girls (ages 9 to 11) and two days for older girls (ages 12 to 14). Sites also provide some evening and weekend activities as well as summer programming. The sites provide a number of other services in addition to GNP; therefore, girls are often involved in after-school programs other than GNP on the days it is not available.

GNP staff at each site design the programs and activities they provide based on GNP goals. Each site is required to provide a certain number of direct service hours and programming must include:

1. Health and Wellness Activities
2. Leadership Activities
3. Career Development Activities
4. Community Service Activities
5. Girls' Council
6. Journaling

Memphis, Tennessee

Girls Inc. of Memphis is the community grantee for GNP. Girls Inc. is a national organization providing programs that focus on the needs of girls. They have developed programming sites in four low-income neighborhoods (Douglass, Hamilton, Riverview, and Frayser — see Appendix A, Figure 2). Sites were selected based on input from the Girls Inc. Board of Directors and the community. The Douglass and Riverview sites are in community centers and the Hamilton and Frayser sites are in church centers. The Douglass and Frayser sites offer full-time programming five days a week after school. The other two sites offer part-time programming three days a week. All the sites have periodic weekend and evening programming as well as summer programming.

Each site coordinator plans her site's daily activities and programs. All programming is age appropriate based on developmental needs. Although the programs are different across the sites, they fulfill GNP requirements and are based on GNP program elements reflected in the Girls Inc. standard curricula as well as locally developed programs. The Girls Inc. content categories are:

1. Careers and Life Planning
2. Health and Sexuality
3. Leadership and Community Action
4. Sports and Adventure
5. Self Reliance and Life Skills
6. Culture and Heritage

Rapid City, South Dakota

Youth and Family Services is the community grantee in Rapid City. Girl Inc. of Rapid City is one component of Youth and Family Services and is the setting for GNP. GNP programs are conducted at the Girls Inc. community center (see Appendix A, Figure 3) every afternoon and evening after school and every Saturday. In addition, the center provides summer programs.[3] Like the Memphis GNP, the programming is based on GNP programming element and uses Girls Inc. standard curricula and Girls Inc. content categories:

1. Careers and Life Planning
2. Health and Sexuality
3. Leadership and Community Action
4. Sports and Adventure
5. Self Reliance and Life Skills
6. Culture and Heritage

Girls are divided by age into developmental groups to participate in different programs. Staff use Girls Inc. curricula to address the above themes, but also develop their own activities and programs and conduct age-appropriate activities.

York, Pennsylvania

Crispus Attucks Association, a youth-serving community center in York, is the community grantee for GNP.[4] In addition to providing GNP programming, this organization reimburses other community agencies for conducting GNP within their standard programs and over and above their standard programs. The York GNP has six independent youth-serving community centers as programming sites (see Appendix A, Figure 4): (1) Crispus Attucks Association — the lead agency, (2) The Arc of York County, (3) YWCA of York, (4) Penn Laurel Girl Scout Council, (5) The Spanish American Center, and (6) The York YMCA. Each site has a different programming schedule, but each provides programming after-school, periodic evening and weekend

[3] The Rapid City GNP provides an additional program called Health Connections. For this program, advocates provide comprehensive healthcare case management and work with girls to obtain any type of health care they require (physical or mental). While this program is funded through GNP, it was not evaluated as part of the current study. Only the out-of-school activity portion of GNP was included.
[4] In York, GNP is called GAPP — Girls Achieving Pure Potential. The program is referred to as GNP for the purposes of this document.

programming, and summer programming. One site provides GNP programming just one day a week, some provide it two days a week, and another provides it up to five days a week. Like Madison's GNP centers, each of the sites provide other types of programming in addition to GNP so that after-school activities are provided every day of the week.

Each site of the York GNP develops its own approach to programming and activities based on GNP programming elements using standard monthly themes designed by the community grantee. Examples of such themes are:

1. Violence Prevention
2. Abuse Prevention
3. Arts/Cultural
4. Multi-cultural
5. Parent-Child Communication
6. Drugs and Alcohol
7. Careers
8. Teen Pregnancy / HIV Awareness
9. Healthy Me (for example, nutrition, body image, spirituality)
10. Sports Awareness

Summary

Because the four community grantees are structured differently, each of the GNP programs function differently although they offer similar program elements. The sites that are conducted by Girls Inc. community grantees (Memphis and Rapid City) are more similar to one another within the community because they are run by one agency. The sites that combine the efforts of multiple community centers have more variation because they bring together independent organizations that may interpret the GNP programming elements somewhat differently. In addition, these community grantees have less influence over how GNP works within the sites because the agencies are subcontractors to a separate entity rather than employees of a single agency.

Structure of Report

The current study focuses on the fourth year of GNP funding at the aforementioned community grantees and follows GNP programming during the academic year (Fall 2000 through Spring 2001). It employs both quantitative and qualitative methodologies with girls, parents of GNP participants, GNP program staff, and representatives from GNP community partners. Chapter 2 describes the study methodology, Chapter 3 describes program attendance and impact hours, Chapter 4 describes the outcomes of the study, Chapter 5 describes a sub-study of community collaboration around GNP programming conducted with GNP partner agencies, and Chapter 6 provides conclusions.

CHAPTER 2
STUDY METHODOLOGY

STUDY PURPOSE AND RESEARCH QUESTIONS

The study was designed based on feedback gathered during visits to each of the four federally funded community grantees during the planning phase of the project. The visits involved discussions with GNP girls, their parents, school representatives (teachers and guidance counselors), and GNP staff. The study is also based on guidance from the National Healthy Mothers, Healthy Babies Coalition and the Maternal and Child Health Bureau. As a result, we were able to incorporate elements in the study that program staff and participants felt were important.

The current study was designed to examine the types of activities offered through GNP and how GNP assists girls in living healthy lives. It includes both qualitative and quantitative methodologies. Specifically, we sought to answer two questions:

1. Do girls who participate in GNP have healthier lifestyles after participating in GNP than before they participated in GNP?
2. Do girls who participate in GNP have increasingly healthier lifestyles the longer they participate in GNP?

STUDY DESIGN AND PROCEDURE

The study was conducted during the fourth year of GNP programming and includes two assessments, or two waves of data collection, from that year of programming. Starting the study during the fourth year of programming allowed community grantees time to establish GNP programs and time for the programs to mature within their communities. Common barriers encountered during the start-up period had been overcome and each community grantee had GNP programs that were fully functional. The timing of Wave 1 and Wave 2 corresponded with the academic year when community grantees' after-school programming began and ended.[5] Therefore, Wave 1 was conducted at the start of programming for the school year (in September or early October 2000) and Wave 2 was conducted at the end of programming for the school year (late April and May 2001).

Quantitative data were collected during visits to community grantees by Urban Institute study team members at Wave 1 and Wave 2. Girls and their parents completed surveys. The girls' survey was read to GNP participants by the study team members during GNP program time. Girls were asked to place completed surveys in envelopes and seal the envelopes before submitting them. In an effort to minimize attrition, girls who completed Wave 1 who were not available at Wave 2 were sent surveys or given surveys by GNP staff to complete on their own and return via the mail or in sealed envelopes. Parents

[5] The timing of the study was dependent upon when the study team was brought into the program to design and conduct it and the funds that were available to do so. Therefore, the study began at the start of the fourth year of programming and the assessments are limited only to that year.

were sent surveys or given survey packets by GNP staff members with self-addressed stamped envelopes to return to the program sites. During Wave 2, parents who attended focus groups completed surveys as part of the focus group session and returned them immediately to Urban Institute study team members in sealed envelopes.

Urban Institute study team members also collected qualitative data through focus groups at Wave 2 of the study. Four focus groups were conducted per community including: (1) girls ages 9 to 11, (2) girls ages 12 to 14, (3) parents of GNP participants, and (4) GNP direct program staff. The purpose of the focus groups was to complement the quantitative data with qualitative information from constituents. We hoped to gather information that would help us understand and illustrate the quantitative findings, as well as tap into information and concepts that were not reflected in the surveys. The groups gave the girls, parents, and program staff the opportunity to reflect on how they think GNP helps, supports, or changes the lives of girls who participate in it.

Across all sites, 284 girls completed surveys at Wave 1 and 202 girls completed surveys at Wave 2, which is 71% of the original sample.[6,7] Table 1 shows the number of girls who completed Waves 1 and 2 by community. Only 108 parents completed surveys

Table 1
Number and Percent of GNP Participants by Community

Community	Number of Girls who Completed Wave 1	Number of Girls who Completed Waves 1 and 2
Madison	116 41%	78 39%
Memphis	54 19%	42 21%
Rapid City	58 20%	43 21%
York	56 20%	39 19%
Total	284 100%	202 100%

[6] The GNP program staff and study team members worked together to reach as many girls as possible during the study assessments. For a number of reasons, however, some girls who attend GNP programs may not have been surveyed during the assessments. Girls who typically attend GNP may have been absent during the day or week that the assessments were taking place or, because GNP has open enrollment, girls may have joined GNP after the Wave 1 assessment making them ineligible to participate in the Wave 2 assessment despite their participation in the program. In addition, some girls may only attend GNP during the summer programming session and may not participate during the academic year.

[7] Six girls who completed surveys were deleted from the sample. Five girls were younger or older than the age range for GNP — we limited the sample to represent third through ninth grades at Wave 1. The girls who were eliminated were in either second grade or tenth grade at the start of the study. The sixth girl was deleted because her Wave 1 and Wave 2 surveys did not match (based on age, grade, etc.) and it was clear two different girls actually completed the surveys under one identification number.

during Wave 1 and 121 did so during Wave 2, 38 percent and 43 percent of the sample respectively.[8] Across the four grantees, 29 girls ages 9 to 11 and 31 girls ages 12 to 14 participated in focus groups during Wave 2. Nineteen GNP direct program staff and 31 parents of GNP girls also participated in focus groups.

Outcome Measures

A number of measures were included in the girls' surveys to assess "healthy lifestyles." Each measure captures an aspect of the girls' psychological, behavioral, social, or academic adjustment. During both Waves 1 and 2, girls were asked about their:

- sense of belonging in the GNP program,
- sense of safety in GNP,
- adult support (both emotional support and instrumental support),
- academic performance (marks, number of absences),
- self-efficacy,
- self-worth,
- scholastic competence,
- social acceptance,
- sense of autonomy and influence in GNP programs,
- sense of community,
- social competence, and
- health risk behaviors (substance use, sexual activity, and yelling at others).

The parents' survey assesses parents' opinions about GNP, their daughters' school performance, and health issues for girls. In addition, parents rate their daughters' social competence.

It is important to note when interpreting results that response scales were coded such that a higher score reflects a higher level of the concept of interest. For example, a higher score for self-efficacy means more positive self-efficacy and a higher score for tobacco use means higher levels of tobacco use. Appendix B describes how we chose the measures that were included and how scale scores were created, lists the items for each measure, and reports Cronbach alpha estimates of internal consistency for each measure.

At focus groups conducted during Wave 2, we asked open-ended questions to girls, parents, and program staff about how GNP affects girls who participate in it and how particular activities influence girls. Specifically, we asked focus group participants to reflect on how GNP has changed the lives of the participants, if GNP helps girls with issues and problems they are currently dealing with (such as puberty, peer pressure, etc.), and how GNP helps girls with the issues with which they are most concerned. In addition, we asked girls which of the activities they enjoy the most and why and what makes them come back to GNP day after day.

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[8] Because so few parents completed surveys, outcomes were not assessed using the parent survey data.

ATTRITION ANALYSIS

Because only a subset of girls who participated in Wave 1 also participated in Wave 2 we conducted analyses to examine bias introduced into the sample due to attrition. Non-random attrition results in greater homogeneity within a sample and increases the risk of not identifying relationships between variables of interest to the study when they really exist (Light Singer, & Willett, 1990; Pedhazur & Schmelkin, 1991). In many cases, attrition leads to a more well adjusted group of individuals remaining in the study while individuals who participate in more risk behaviors or who have more problems with adjustment drop out (Zweig, 1997).

Effects of attrition were estimated by conducting a series of *t*-tests and chi-squared tests comparing the girls who did and did not complete Wave 2 on Wave 1 indicators of adolescent psychological, behavioral, social, and academic adjustment. Specifically, girls who did and did not leave the study were compared on sense of belonging in GNP, adult emotional support, adult instrumental support, self-efficacy, self-worth, scholastic competence, social acceptance, social competence, autonomy and influence in GNP, sense of community, age, grade, whether or not girls repeated a grade, number of siblings, family structure, school absences, school marks, maternal education, perception of safety at GNP, tobacco use, alcohol use, marijuana use, other illicit drug use, huffing and sniffing, arguing with others, going on dates with others, holding hands with others, kissing, sexual touching, and having sexual intercourse.

We found that for this study, little observed bias entered the sample due to attrition, although other unmeasured differences may have existed between the group that left the study and the group that remained in the study. Based on our analysis, the girls who left the study and those who remained in the study were very similar. Only two statistically significant differences between the two groups were found. Based on *t*-tests, it appears that the attrited group had significantly lower levels of yelling at others during the six months before Wave 1 than the girls that remained in the study ($t(280)=-2.30$, $p < .05$) and significantly higher levels of adult instrumental support than those who remained in the study ($t(279)=2.0$, $p < .05$).

CHARACTERISTICS OF GNP PARTICIPANTS

GNP community grantees design programs for girls living in low-income neighborhoods. In the survey, the girls were asked to report the family members with whom they live most of the time. Twenty-eight percent of girls lived with both their mother and father, 12 percent of girls lived with one parent and a stepmother or stepfather, 6 percent of girls lived with one parent and that parent's boyfriend or girlfriend, 43 percent lived with their single mothers, and 4 percent lived with their single fathers. Seven percent of girls reported other unique types of family structures or did not provide enough information to categorize them.

The girls also reported the highest education their mothers completed.[9] Nineteen percent of mothers had not completed high school, 34 percent had completed high school, five percent had attended vocational, technical, or business school, 18 percent had completed some college, 17 percent had graduated from college, and 7 percent had completed at least some graduate or professional school.

Across the four community grantees, the GNP participants were a diverse group of girls. Fifty-two percent of the participants were African-American, 17 percent were white, 11 percent were Asian/Pacific Islander, 6 percent were American Indian, and 4 percent were Hispanic. Another 11 percent reported being biracial, with 9 girls being both African-American and white, 8 girls being both Hispanic and white, 2 girls being American Indian and white, one girl being American Indian and Asian/Pacific Islander, and 1 girl being Hispanic and American Indian. Table 2 shows the girls' races by their GNP community.

Table 2
Race of GNP Participants by Community

Race	Madison N %	Memphis N %	Rapid City N %	York N %	Total by Race N %
African-American	36 46%	42 100%		27 69%	105 52%
Hispanic	2 3%			5 13%	7 4%
Asian/Pacific Islander	19 24%			3 8%	22 11%
American Indian	4 5%		9 21%		13 6%
White	6 8%		26 61%	2 5%	34 17%
African-American and white	8 10%		1 2%		9 5%
American Indian and white			2 5%		2 1%
Hispanic and white	3 4%		3 7%	2 5%	8 4%
American Indian and Asian/Pacific Islander			1 2%		1 .5%
Hispanic and American Indian			1 2%		1 .5%
Total Samples	78 100%	42 100%	43 100%	39 100%	202 100%

[9] 52 girls — or 26% of the sample — left the question regarding mother's education blank.

All the GNP girls in Memphis were African-American. Almost half the girls in Madison were African-American and another quarter of the girls were Asian/Pacific Islander.[10] Sixty-one percent of girls in Rapid City were white and another 21 percent were American Indian. Sixty-nine percent of York girls were African-American and 13 percent were Hispanic.

At Wave 2, the girls ranged in age from 8 to 15 (M=11.5). Table 3 shows the girls' ages by community and the total sample. Grades in school ranged from third to ninth grades for participants: 4 percent were in third grade, 16 percent were in fourth grade, 26 percent were in fifth grade, 26 percent were in sixth grade, 14 percent were in seventh grade, 11 percent were in eighth grade, and 4 percent were in ninth grade. Thirteen percent of girls had repeated a grade in school.

Table 3
Age of GNP Participants by Community

Age	Madison N %	Memphis N %	Rapid City N %	York N %	Total by Age N %
8			1 2%		1 .5%
9	6 8%	2 5%	5 12%	3 8%	16 8%
10	12 15%	6 15%	12 28%	9 23%	39 19%
11	16 21%	16 39%	13 30%	7 18%	52 26%
12	21 27%	7 17%	8 19%	4 10%	40 20%
13	12 15%	4 10%	2 5%	6 15%	24 12%
14	11 14%	3 7%	2 5%	6 15%	22 11%
15		3 7%		4 10%	7 4%
Total Samples	78 100%	41 100%	43 100%	39 100%	201 100%

Note: One girl from Memphis did not report information on her age.

CONCLUSION

Based on analyses presented here it appears that attrition from the GNP study did not adversely affect it because observed bias was not introduced into the sample. The girls

[10] Madison has a large Hmong population and one site serves girls from this population.

who left the study were very similar to those that remained in the study on nearly all measures. Also, the girls who participated in GNP represented a diverse group of girls based on race/ethnicity, age, and family structure.

CHAPTER 3
PROGRAM DOSAGE AND IMPACT HOURS

GNP includes activities during out-of-school time for youth, including weekday after-school and evening programming as well as weekend and summer programming. GNP staff document program dosage and impact hours by tracking the amount of programming girls receive and the activities that are conducted.

PROGRAM DOSAGE

Program dosage is tracked through attendance records. The staff for every site take attendance every day they provide GNP activities. As a result, we were able to examine the number of days of programming that girls attended. The amount of programming days offered varies greatly from one community grantee to another with some sites within communities providing more days of programming than others. For example in York, the Spanish American Center and the Arc of York County sites provide GNP programming five days a week whereas the Girl Scouts site, Crispus Attucks Association, and the YWCA provide such programming on two days a week. The YMCA provides GNP programming once a week. Similar patterns occur in Madison and Memphis where some sites provide programming every weekday and others provide programming only certain days of the week. Rapid City includes only one center and it provides programming every weekday and Saturday. (See Appendix A for community grantee structures.)

Because of the variation mentioned above, each of the four community grantees reported different levels of girls' attendance in GNP programs. Overall, girls' attendance in GNP ranged from 1 day to 172 days throughout the fourth year of GNP programming during the school year and the average attendance for girls was 62 days. Table 4 shows the range of days girls attended and their average attendance by community along with the differences among them. On average, girls from Rapid City attended more days of programming than girls from all other communities. Girls in Memphis attended more days of programming than girls from Madison and York. It is important to note that these differences may be based on the number of days the community grantees actually provided programming rather than the willingness of girls to attend programs frequently. Since programming varied from site to site, so did the opportunity to attend.

In addition to attendance for the fourth year of programming, we also asked girls at what grade they started attending GNP. Using this information and their current grade we were able to calculate the number of grades in which they attended GNP programming. Twenty-two percent of girls attended GNP for one grade (during the fourth year of programming). Thirty-six percent of girls had been in GNP for two grades, 27 percent had been in the program for three grades, and 11 percent had been in the program for four grades, that is, since the inception of the program. Another 5 percent of girls reported being in the program for longer than four grades, however, specific GNP programs had

only been available for four years at the time of the Wave 2 assessment. These girls were perhaps reporting the length of their participation in the community center in general.

Table 4
Attendance by Community

Community	Minimum Days Attended	Maximum Days Attended	Average Days Attended
1. Madison[2,3]	1	93	42
2. Memphis[1,3,4]	9	123	75
3. Rapid City[1,2,4]	2	172	106
4. York[2,3]	12	58	26

Note: Six girls from Madison, 1 girl from Memphis, and 10 girls from York did not have attendance data. No data were provided for GNP participants attending the Spanish American Center in York for the second half of the program year. Missing data limit the accuracy of the data reported here.
Superscripts 1, 2, 3, and 4 indicate statistically significant differences in attendance by site at $p < .05$.
Results are based on a one-way Analysis of Variance with follow-up Tukey tests (Overall model = $F[3, 181] = 56.11$, $p < .001$).

Program Impact Hours

GNP programming includes a wide variety of activities ranging from those using structured curricula to unstructured recreational activities. Each community grantee tailors its programming to meet the unique needs of the girls who attend and the concerns of the community in which they live. As a result, some grantees may do more programming on particular topics than others.

In order to keep track of the programming that is provided, staff are required to complete GNP Group Activity Report Forms after each day of activities. The forms indicate the topics that were covered during programming for a day and staff are able to mark multiple topics for each day. For the purposes of this document, impact hour is defined as a mark on the Group Activity Report Form. Each mark is considered one impact hour of programming on that topic.

One impact hour is a rough estimate of program time, however, because length of programming and activities fluctuate by community grantee. For example, there is no uniform measure by which a staff person marks a topic as covered during a day's programming: some staff may mark only the primary topic that was covered during a day and another person may mark all the topics that were covered in a day regardless of how much time was spent on the topic. In addition, staff complete the form differently by community and by site within communities. In Rapid City, staff complete the form after every activity, sometimes submitting three or more forms per day. Staff from other cities only submit one form per day. As a result, the number of impact hours for Rapid City is considerably higher than all other communities. Because of the dramatic differences in the way the staff complete forms, there is no way to actually compare the communities by the number of program impact hours they have provided throughout the year.

Although grantees cannot be compared to one another, the activity reports allow us to determine if grantees report impact hours of the required program elements. During the fourth year of programming, grantees were to provide at least 25 impact hours each of community service, health education, and career development. All four grantees exceeded these requirements.

For community service, all four community grantees met or exceeded the required 25 impact hours with community service projects, volunteering, and other leadership activities. Three grantees offered two to three times as many hours on community service as required. All four grantees also greatly exceeded 25 impact hours of health education, conducting education on hygiene, puberty, menstruation, sexual activity, teen pregnancy, sexually transmitted diseases, and substance use. For career development, all four grantees exceeded 25 impact hours with programs focused on career exploration, employment, job readiness, post secondary education, and functioning well and getting along at school.

Each of the four grantees also provided other common programming issues and activities. All provided journaling and activities on life skills such as violence prevention (both general violence and interpersonal violence), communication skills, getting the help the girls need, injury prevention, and money management and consumer issues. Finally, all grantees conducted considerable impact hours focusing on peer relationships and on mentoring, as measured by time spent on adult-youth relationships.

In sum, although GNP community grantees can be flexible in designing their activities, they all offer the required program elements. Indeed, every site exceeds the required number of impact hours for the mandatory program elements. In addition, they provide other common activities that are not required, but appear to be appropriate in every site.

CHAPTER 4
WHAT DIFFERENCE DOES GNP MAKE IN THE LIVES OF GIRLS?

The main objective of the current study was to assess whether GNP assists girls in living healthier lifestyles. Many of the girls participating in GNP seem to have been involved in living healthy lifestyles during both Wave 1 and Wave 2 assessments. We first examine the responses to each outcome separately and how qualitative focus group information relates to each. Next, we examine GNP participation by the two research questions of interest.

OVERALL, GNP GIRLS REPORT HEALTHY LIFESTYLES

Based on descriptive statistical information, most girls in GNP report positive levels of psychological, social, behavioral, and academic adjustment during *both Wave 1 and Wave 2 assessments.* In addition, based on qualitative information from focus groups, girls enjoy GNP programming and feel it impacts their lives in meaningful ways. If girls already participate in healthy lifestyles at Wave 1, it may be difficult to detect changes in girls at Wave 2.

Sense of Belonging in GNP

GNP provides a context in which girls feel like they "belong" (Zweig, 2000). Youth have a sense of belonging in situations where others value their contributions and time spent together (Gambone & Arbreton, 1997). Many girls reported feeling a sense of belonging in GNP most or all of the time at both Waves 1 and 2 (73 and 70 percent, respectively). These girls reported feeling that their ideas counted in GNP, people listened to them at GNP, they mattered in GNP, and GNP was a comfortable place to hang out.

This theme came through in focus groups, too. Girls reported that GNP provided a trusting environment where staff treated them well, where they had many friends, and where they had many opportunities. GNP staff reported that creating a sense of belonging in GNP for girls was one of the most important parts of the program, and that it is about, "having girls feel like they are a part of a group — something larger than themselves."

> *Over 90 percent of girls reported having two or more adults who provided them with emotional support and instrumental support, meaning they had adults in their lives who could offer advice, help during emergencies, provide positive attention, and help with schoolwork.*

Adult Emotional and Instrumental Support

Ninety-four percent of girls reported having two or more adults who provided them with emotional support at Wave 1 and 93 percent reported the same at Wave 2. Emotional support includes positive attention and reinforcement and support when emotionally upset. Ninety-three percent of girls at Wave 1 and 95 percent of girls at Wave 2 reported two or more adults provided them with instrumental support meaning they had adults in their lives who could provide pragmatic assistance such as offer advice, help during emergencies, and help with schoolwork.

At GNP, girls received emotional and instrumental support from adults other than their parents. During focus groups, girls reported that the staff was one of the most important parts of the GNP program and one reason they came back to GNP day after day. The staff were people the girls felt comfortable going to for help with problems and to discuss personal problems (for example, changes in their bodies, problems with friends or parents, and parents' divorces). Girls said things like:

- "I really like our director…you can talk to [her] about anything;"
- "If you need someone to talk to, they are there;"
- "She's just so important;"
- "She gives you the stuff you need, the goals, and keeps you going and makes you not give up…you want to impress her and make her happy because she's done so much for you;"
- "She's like a second mom for us. She's always there;" and
- "She demands respect and gets it" ... (another girl) " and she gives respect."

Parents of GNP girls also reported the staff were valuable sources of support both for themselves and their daughters. They reported during focus groups that they have talked with the GNP staff about important issues for their daughters and asked advice about discipline issues. The staff were also seen as positive role models for their daughters. One parent said, the GNP staff "put [the girls] at a level they can respect. She puts them up there, she makes them feel important." Another parent reported that, "for many of these kids, the staff is the only stable thing in their lives."

One objective of GNP is building caring and supportive relationships between youth and adults. The staff actively work on building supportive relationships with girls. One GNP staff person said during a focus group, "if [the girls] have parents that are supportive, we're their extra support. If they don't have parents that are supportive, we're their support." The results indicate the staff are meeting this objective.

During focus groups, girls reported that the staff was one of the most important parts of the GNP program and one reason they came back to GNP day after day.

Self-efficacy and Self-worth

One of GNP's goals is to increase girls' self-efficacy and feelings of self-worth. Self-efficacy is belief in your own capability to accomplish goals. Programs that provide girls with the chance to make decisions and act in leadership roles increase their feelings of self-efficacy (Sipe & Ma, 1998). At Wave 1, 62 percent of girls agreed with positive statements regarding their perceptions of self-efficacy and 66 percent did so at Wave 2. They agreed with statements such as, "If I can't do a job the first time, I keep trying until I can," "When I make plans, I am sure I can make them work," and "Failure just makes me try harder." In addition, self-worth is acceptance of self and belief that you are as good a person as others. Eighty-six percent of girls reported having positive self-worth at Wave 1 and 89 percent reported the same at Wave 2. These girls felt they were happy with themselves, liked the way they were leading their lives, and did not wish they were different or someone else.

Indeed these themes came through during focus groups with girls, parents, and GNP program staff. Girls reported being more comfortable with themselves, being more confident, and having higher self-esteem since joining GNP. Parents also reported seeing increases in their daughter's self-esteem, confidence, and self-respect. In addition, GNP program staff said girls became more confident as a result of being in GNP.

During a focus group, one girl said, "nobody can tell me what I can and cannot do. Nobody can talk about me or say anything bad about me without me having confidence in myself." Another girl said, when she started in GNP she "had very low self-esteem and hated the way I looked...I couldn't accept myself and I came here and it took me awhile, but I took time out to talk to people and took time out to focus on me and how I felt about myself and now I'm a better person." A third girl reported, "if they come [meaning new girls to participate] they can get more confidence in themselves, they can get more mature."

A GNP staff person also spoke of increases in self-esteem that she saw among the girls that participated in her programming. She said, "One of my girls came into the program with very low self-esteem...and now she has a four year scholarship with [deleted for confidentiality]...because she is not feeling bad about herself and she's feeling like she has that confidence and she's not afraid to speak in front of people and she's not afraid to be different...because before she came to the program...she thought she was black and ugly."

GNP assists girls in increasing their self-confidence. During a focus group, one girl said, "nobody can tell me what I can and cannot do. Nobody can talk about me or say anything bad about me without me having confidence in myself."

Scholastic Competence and Academic Adjustment

Many GNP girls reported believing they were scholastically competent, receiving high marks in school, and attending school regularly. Three-quarters of the girls reported

having positive scholastic competence at Wave 1 and 72 percent of girls reported the same at Wave 2. Scholastic competence is believing you are as smart as others the same age, you can remember things easily, you complete schoolwork quickly, and you can almost always figure out the answers in school. During Wave 1, about 77 percent of girls reported receiving A's and B's in school and 64 percent reported the same at Wave 2. Many girls also attended school regularly, with about half missing less than five days of school per year. Similar themes regarding academic adjustment were revealed during focus groups. Girls reported they did more homework, felt more prepared for schoolwork, and received better grades than before participating in GNP.

What is not clear from these findings, however, is how accurate girls are when it comes to reporting marks and perceptions of scholastic competence. Social desirability may influence girls such that they inflate their school marks when responding in surveys such as this. After comparing grades that GNP staff at one site collected from report cards to girls' self-reports of grades at Wave 2, it is clear that 65 percent of girls in that one site reported higher grades on the survey than they actually received. The extent to which this grade inflation occurred is not known for the entire sample. Recent research has shown that during middle childhood (ages 8 to 9) children rate their level of ability on tasks and activities very high regardless of their actual skills (Eccles, 1999). But, by age 10, ratings are closer to their actual ability levels. Taking all this into account, it is clear we can not be confident that girls' ratings of school marks and scholastic competence are fully accurate.

Social Acceptance

GNP was a source of friendship for girls. One girl reported, "the girls that are a part of [GNP] now... befriended me when nobody else would."

Most girls reported feeling accepted and well-liked by their peers. During Wave 1, 76 percent reported having positive social acceptance and 82 percent did so at Wave 2. These girls reported being popular with kids their age, having a lot of friends, and making friends easily.

GNP was a source of friendship and social acceptance for girls. During focus groups, girls and parents reported that girls made new friends at GNP and had more friends since joining GNP. Girls and GNP program staff also reported there was cohesion among the GNP girls and they did not form cliques within the program. The girls discussed the importance of being around and talking with other girls who understood their problems or who had similar problems. One girl reported, " the girls that are a part of [GNP] now ... befriended me when nobody else would." One parent reported, "[the girls] work things out together all the time."

About two-thirds of the girls reported being socially competent and being able to find ways to help people end arguments, listen carefully to what others say, work with other children, help people when they are in need, and find ways to solve problems.

Social Competence

Social competence is a measures of a person's interpersonal and communication skills. Most girls reported feeling socially competent during Waves 1 and 2 (75 percent and 74 percent, respectively). Specifically, the girls reported being able to find ways to help people end arguments, listening carefully to what other people say, being good at working with other children, knowing how to help people when they are in need, and being able to find fair ways to solve problems. For those parents that completed surveys, 78 percent at Wave 1 and 79 percent at Wave 2 reported their daughters were socially competent.

In every focus group we conducted, girls, parents, and GNP program staff attributed changes in girls' social competence to GNP programming. Girls' social competence developed in a number of ways. Specifically, focus group participants talked about girls becoming more respectful, less "smart mouthed," less defiant, "nicer," and more socially appropriate in various situations. In addition, they talked about girls growing and maturing, becoming less shy and more assertive, and increasing their communication skills. Girls reported being more open with their parents, feeling more comfortable expressing their feelings and opinions, and communicating better with their friends and peers. GNP program staff reported that they think girls are making better decisions as a result of participating in GNP. The staff try to equip girls with the knowledge to make informed choices and they believe girls do indeed make better choices as a result. Further, focus group participants reported girls developing better "manners" and etiquette skills in order to act appropriately in various public situations.

In every focus group we conducted, girls, parents, and GNP program staff attributed changes in girls' social competence to GNP programming.

One girl reported she was " learning how to communicate with other girls" in GNP. Another girl reported "I was, like, uncontrollable at home and it was hard for me to make friends. But, like, when I started joining [GNP], I started to become a kinder person and I made myself a better person."

Sense of Community

Few girls reported a sense of community in the neighborhoods they lived in. At Wave 1, only 36 percent agreed with positive statements and only 39 percent did so at Wave 2. The types of statements these girls agreed with were, "people who live in my neighborhood really care about each other," "people who live in my neighborhood help each other, even if they are not friends," and "when I am having a problem, someone in my neighborhood will help me." Although one of GNP's goals is to connect girls to their community and develop civic responsibility, more than half did not feel a sense of community in the neighborhoods in which they live. This may reflect the level at which the neighborhood is unsupportive for girls or a difficult place for people to live and feel connected.

Girls in focus groups reported important aspects of GNP were getting to know their community more, developing leadership skills, and providing community service.

Despite the scores on survey measures, girls in focus groups reported important aspects of GNP were getting to know their community more, developing leadership skills, and providing community service. They reported that community service was positive because it "feels good" to help others, contributed to society, and cleaned up the community. In addition, their attitudes about community service had changed since they began to participate in GNP. Girls reported that they used to think community service was "nerdy," scary, or only for people who did something wrong and needed to pay back society. However, after participating in community service through GNP, they realized it can be fun, it was important to do, and they were willing to do it. One girl reported, "I feel good because you're giving stuff to other folks and someday you might need it." Another girl reported, community service "feels better because we are actually doing something for the community and not just for us."

Sense of Autonomy and Influence in GNP

The Developmental Studies Center (1995) describes sense of autonomy and influence in programs as the degree to which youth perceive that they can contribute to classroom (or program) planning and decision-making. Only about half of the girls felt a sense of autonomy in GNP and that they influenced the programming most or all of the time (50 percent at Wave 1 and 47 percent at Wave 2). Another third felt this way some of the time (36 percent at Wave 1 and 33 percent at Wave 2). Girls who reported a sense of autonomy and influence in GNP felt they had a say in deciding what was going on and the activities they do and in deciding the rules of the program with the staff, and they could get a rule changed if they felt it was unfair. While half the girls felt this way about the program, half the girls did not.

Statements made in focus groups confirm the above survey findings in that some girls felt they did not have an influence over GNP programming. Some girls discussed not having had enough time to do the activities they wanted to do. Some felt the staff spent too much time discussing some issues (for example sex and reproduction) and too little time on other issues of concern to the girls.

Safety at GNP

About half of the girls (52 percent at Wave 1 and 47 percent at Wave 2) reported GNP was a little or a lot more safe than other places where they spent time. Another 35 percent at Wave 1 and 40 percent at Wave 2 reported GNP was as safe as other places they spent time. During focus groups, girls, parents, and GNP program staff all emphasized that GNP provided a safe place for girls to spend time. They reported that GNP was a place where girls were off the streets, out of trouble, safe, and out of danger. One parent described GNP as a "safe haven and [the girls] learn about themselves."

Substance Use

Most girls who participated in GNP do not use alcohol, tobacco, or other drugs. Table 5 shows the frequency of substance use in the six months before the Wave 1 and Wave 2 assessments. While few changes in substance use were demonstrated, girls discussed how GNP affected their knowledge, feelings, and behaviors regarding substances during focus groups. They reported that one of the most important aspects of GNP was learning not to use drugs. They reported that the things they learned in GNP helped them to deal with peer pressure and drug issues they faced in their lives at the time. In addition, GNP program staff and parents reported substance use education was among the most important issues addressed by GNP.

Table 5
Percent of Girls Reporting Substance Use Before Assessments

	Wave 1		Wave 2	
	No Use During Six Months Before Wave 1	Used Three or More Times	No Use During Six Months Before Wave 2	Used Three or More Times
Tobacco Use	87	7	91	4
Alcohol Use	85	7	87	5
Marijuana Use	95	3	87	6
Other Illicit Drug Use	95	1	98	1
Huffing or Sniffing	91	3	97	1

Yelling at Others

Yelling at others was the most frequently reported health risk behavior. Many girls reported yelling at others during the six months before Wave 1 (54 percent did it three or more times) and the six months before Wave 2 (60 percent did it three or more times). Only 15 percent of girls never yelled at someone before Wave 1 and only 12 percent never did so before Wave 2. The context in which the yelling occurs, however, is not clear. The yelling may be used as an alternative to physical fighting or as a way the girls express themselves. Despite the survey results, girls, parents, and GNP program staff reported during focus groups that girls were arguing less and resolving conflicts in better ways since being in GNP.

During focus groups, girls reported that one of the most important aspects of GNP was learning not to use drugs.

Sexual Activity

Most girls who participated in GNP were not sexually active during the six months before Wave 1 and Wave 2. For those girls participating in some

GNP staff and parents reported that health and sexuality programs were among the most important issues that GNP addressed.

sexual activities, most reported holding hands and kissing. Very few girls reported being touched sexually or having sexual intercourse (see Appendix B for specific wording of questions). Table 6 reports the frequencies with which girls participated in sexual activities.

During focus groups, many girls reported that one way GNP helped them was to make them feel prepared for puberty, both physically and mentally.

Two themes about sexuality were revealed during focus groups with girls. First, many girls reported that one of the most important parts of GNP was learning about abstinence and not having sex while they are in high school, learning about HIV, and learning to not become pregnant during adolescence. One girl said, "if I didn't know half the stuff I learned here in the past four years, I think I would have already [been pregnant or lost her virginity]." Second, many girls reported that one way GNP has helped them was to make them feel prepared for puberty, both physically and mentally. They reported feeling like they understood what was happening to their bodies and were comfortable with the physical changes in their bodies. GNP program staff and parents reported that health and sexuality programs were among the most important issues that GNP addressed.

During focus groups, girls reported that one of the most important parts of GNP was learning about abstinence.

Table 6
Percent of Girls Reporting Sexual Activities Before Assessments

	Wave 1		Wave 2	
	Never During Six Months Before Wave 1	Three or More Times	Never During Six Months Before Wave 2	Three or More Times
Holding Hands	40	34	43	32
Kissing	65	16	70	13
Being Touched Sexually	86	3	83	9
Having Sex	94	2	95	2

Other Themes from Focus Groups

In addition to the focus group findings that have been presented thus far, three other themes were revealed. First, both girls and parents reported that one important aspect of GNP was teaching girls about health and hygiene. The programs teach girls about cleanliness and assist girls in getting appropriate products, such as deodorant.

Expressing feelings through journaling helped girls to deal with frustration, calm down, and feel better.

Second, most girls in focus groups reported enjoying journaling. Journaling provided an opportunity for girls to get concerns off their minds and "someone" to talk to. Expressing feelings through writing helped

girls to deal with frustration, calm down, and feel better. One girl reported, journaling "gets my feelings out" and another reported, "it's relaxing for me."

Third, girls, parents, and GNP program staff all reported that GNP provided girls with the opportunities to do activities they would not otherwise have done and learn things they would not otherwise have learned. Specifically, girls reported:

- we get to go to "places we have never gone;"
- GNP has "lots of opportunity for us;" and
- "I think if I never started GNP my life would be so boring...I wouldn't be able to go to the places or do the things that I do right now because of GNP."

During focus groups, girls, parents, and GNP program staff all reported that GNP provided girls with opportunities to do activities they would not otherwise have done and learn things they would not otherwise have learned.

One program staff person commented, "this has been a really neat opportunity for [the girls]. I mean you can just see the girls ...because they learned different things here that maybe [their] parents won't share with [them] or teachers ... whatever pieces they might have missed from their parents or at school they're getting here and you can tell."

DO GIRLS WHO PARTICIPATE IN GNP HAVE HEALTHIER LIFESTYLES AFTER PARTICIPATING IN GNP THAN BEFORE THEY PARTICIPATED IN GNP?

To answer this question, we must understand how girls were different during Wave 2 compared to when we assessed them during Wave 1. It is important to note that because this design is a simple examination of Wave 1 and Wave 2 assessments without a comparison group of girls of similar age and background, it is difficult to attribute changes in girls to GNP specifically because other influences may be occurring to elicit the changes. Age may influence girls' responses over the course of a year because of maturation. Maturation may influence all the outcomes, particularly those related to health risk behaviors. For example, a greater number of older adolescent girls participate in sexual activities and use substances than younger adolescent girls (Lindberg et al., 1999). In addition, many of the girls (78 percent) participated in GNP before the Wave 1 assessment.

On average, girls had significantly higher levels of adult instrumental support, self-worth, and social acceptance at Wave 2 compared to Wave 1.

With these caveats in mind, a series of paired *t*-tests were conducted to examine if girls' reports of psychological, social, behavioral, and academic adjustment changed from Wave 1 to Wave 2. The first step to this analysis involved creating a difference score for each outcome by subtracting the Wave 1 score from the Wave 2 score. Table 7 includes the results of the *t*-tests.

Girls changed between Wave 1 and Wave 2 assessments. On average, girls had significantly higher levels of adult instrumental support, self-worth, and social acceptance at Wave 2 compared to Wave 1. They also reported significantly lower levels of huffing and sniffing at Wave 2 than Wave 1. Although not significant, there was a trend indicating that girls reported higher levels of self-efficacy at Wave 2 than Wave 1. These results indicate that participation in GNP positively influences girls' psychological adjustment and participation in one health risk behavior — huffing and sniffing.

In addition to these findings, however, some less positive effects were also found. At Wave 2, girls reported lower marks in school, lower feelings of belonging in GNP programming, and higher marijuana use than at Wave 1. In addition, although not significant, there was a trend indicating that girls reported higher levels of being touched sexually by another person. These findings indicate that feelings of belonging in GNP and their perception of their school marks may decrease throughout the academic year of

Table 7
Means of Outcomes at Wave 1 and Wave 2
Reported by GNP Participants

Outcome	Mean at Wave 1	Mean at Wave 2	*t*-statistic
Sense of Belonging in GNP	3.93	3.81	-2.20*
Sense of Safety in GNP	3.68	3.51	-1.58
Adult Emotional Support	2.26	2.32	1.32
Adult Instrumental Support	2.29	2.41	2.65*
School Marks	6.55	6.16	-3.74*
School Attendance	5.03	4.91	-0.67
Self-Efficacy	3.64	3.73	1.89+
Self-Worth	3.07	3.29	3.52*
Scholastic Competence	2.91	2.97	0.73
Social Acceptance	2.92	3.12	4.04*
Sense of Autonomy and Influence in GNP Programs	3.34	3.24	-1.50
Sense of Community	3.24	3.24	0.24
Social Competence	3.91	3.91	0.24
Tobacco Use	0.29	0.19	-1.46
Alcohol Use	0.32	0.26	-0.68
Marijuana Use	0.11	0.28	2.55*
Other Illicit Drug Use	0.07	0.05	-0.94
Huffing or Sniffing	0.17	0.06	-2.29*
Yelling at Others	2.09	2.21	1.53
Holding Hands with Others	1.40	1.30	-1.00
Kissing	0.74	0.62	-1.55
Being Touched Sexually	0.24	0.38	1.79+
Having Sex	0.11	0.09	-0.47

Note: * = $p < .05$
+ = $p < .10$
Response scales were coded such that a higher score reflects a higher level of the concept of interest.

programming and, despite participating in GNP, girls may use more marijuana at Wave 2 than Wave 1.

The finding regarding school marks may not be accurate given that it is not clear if girls are reporting their grades accurately. GNP staff indicate and we have shown with information from one site that social desirability may be reflected in girls' self-reports of grades, with some girls reporting higher grades than they actually receive. In addition, younger children tend to rate their abilities high regardless of their skill level and children tend to become more accurate in rating their abilities as they get older (Eccles, 1999). Over the course of the year, some girls may have matured into more accurate ratings of their abilities.

Although girls reported more marijuana use at Wave 2 than at Wave 1, fewer girls may be using marijuana than is shown in national prevalence rates. For example, in the National Longitudinal Study of Adolescent Health, 8 percent of seventh and eighth grade girls reported using marijuana (Lindberg et al., 1999). At Wave 2, only 6 percent of seventh and eighth grade girls in GNP used marijuana.

Do Girls Who Participate in GNP Have Increasingly Healthier Lifestyles the Longer They Participate in GNP?

We first examined if girls were leading healthier lifestyles after participating in GNP than before participating in GNP. This analysis was a simple comparison of Wave 1 and Wave 2 scores on outcomes and gave us a basic understanding of how girls changed during the fourth year of GNP programming. However, we were also interested in understanding if there were even greater influences of GNP the longer girls participated. To answer this question, we conducted two sets of analyses. First, we examined each outcome taking into account the number of days girls attended GNP during the fourth year of programming. Second, we examined each outcome taking into account the period of time spent in GNP (as measured by number of grades the girls attended GNP) to account for the fact that most girls (78 percent) attended GNP before the Wave 1 assessment.

For both sets of analyses, we conducted a series of Ordinary Least Squares Regression models. The models were run separately by each outcome variable and included three independent variables: the Wave 1 score of the outcome of interest, age, and attendance or number of grades. It was important to include Wave 1 scores for outcomes and age in order to control for effects of preexisting conditions and for the effects of age and maturation as much as possible. Full models were estimated because we wanted to know if attendance or the number of grades in GNP affects outcomes net of the effects of girls' Wave 1 scores for the outcome and net of the effects of age on the outcome. For example, we wanted to know if girls' self-efficacy scores increase due to attendance in GNP, regardless of their scores on self-efficacy at Wave 1 and regardless of their age or how self-efficacy scores may change as a result of age. By including the three variables in one model, we were able to tell if a girl's self-efficacy score at Wave 2 had increased

because of attending GNP and not just because she had high self-efficacy during Wave 1 and was, for example, 13.

Table 8 shows the results of the first analysis predicting outcomes by amount of attendance in GNP during the fourth year of programming. The more days girls attended GNP, the more they attended school and the higher they rated their social competence. Also, the more days girls attended GNP the less likely they were to report having been touched sexually in the six months prior to assessment.

In addition to these findings, we also found that the more days girls attended GNP the less likely they were to report feeling they have a sense of autonomy and influence over GNP programming. In other words, the greater the number of days girls attended GNP during the year the less they felt they had decision-making power in GNP, influence over the activities that were conducted, and ability to create and change rules.

The more days girls attended GNP, the more they attended school and the higher they rated their social competence.

GNP community grantees attempt to incorporate girls' feedback into programming, but also develop programming based on their required program elements and the overall GNP objectives for programming. Therefore, although girls' input is sought, GNP programs are not based solely on it and do not solicit it as often as they could.

Also, providing appropriate feedback for designing programs may be developmental. GNP staff reported that the younger girls are not yet prepared to provide appropriate feedback, but the older girls are prepared. Allowing girls to provide feedback when they are prepared to provide mature comments allows sites to give girls meaningful leadership opportunities during which they can take girls' suggestions seriously. For example, Madison operates Girl Councils in each of their sites consisting of a sub-set of older girls (ages 14 and 15) from the site. Girl Councils are not conducted with all older girls because they are very expensive and require a great deal of staff time devoted to only a small group of girls. All of the 14-year-old girls in the sites are prepared to do this, but only a few get the opportunity to do so.

Finally, it is interesting to note that some behavioral outcomes were significantly predicted by age and not by GNP programming indicating maturation may be influencing the outcomes reported here. In particular, yelling at others, holding hands with others, and kissing were all significantly predicted by age in that the older the girls were the more likely they were to report these experiences. In addition, a trend was found predicting tobacco use by age.

Based on these findings, girls increased their academic, social, and behavioral adjustment the more days they attended GNP. However, the more they attended the less they felt they influenced GNP programming.

Table 8
Full Regression Models Predicting Outcomes by Amount Attendance at GNP

Outcome	F-value	R-square (Proportion of Variance Explained)	Parameter Estimate	Standard Error
Sense of Belonging in GNP	31.64*	.35		
Wave 1 Score			0.578*	0.06
Age			0.048	0.04
Attendance			0.001	0.00
Sense of Safety in GNP	1.12	.02		
Wave 1 Score			0.099	0.07
Age			0.001	0.06
Attendance			-0.002	0.00
Adult Emotional Support	7.58*	.11		
Wave 1 Score			0.322*	0.07
Age			0.007	0.03
Attendance			-0.001	0.00
Adult Instrumental Support	5.59*	.11		
Wave 1 Score			0.298*	0.07
Age			-0.003	0.03
Attendance			-0.002	0.00
School Marks	26.22*	.32		
Wave 1 Score			0.674*	0.09
Age			-0.091	0.06
Attendance			-0.002	0.00
School Attendance	4.70*	.08		
Wave 1 Score			0.119	0.08
Age			-0.020	0.07
Attendance			0.008*	0.00
Self-Efficacy	11.54*	.17		
Wave 1 Score			0.394*	0.07
Age			-0.026	0.03
Attendance			0.001	0.00
Self-Worth	12.53*	.19		
Wave 1 Score			0.461*	0.08
Age			0.009	0.03
Attendance			0.002	0.00
Scholastic Competence	39.90*	.42		
Wave 1 Score			0.752*	0.07
Age			-0.019	0.03
Attendance			0.001	0.00

Table 8
Full Regression Models Predicting Outcomes by Amount Attendance at GNP (Continued)

Outcome	F-value	R-square (Proportion of Variance Explained)	Parameter Estimate	Standard Error
Social Acceptance	20.74*	.27		
Wave 1 Score			0.549*	0.08
Age			0.020	0.04
Attendance			0.001	0.00
Sense of Autonomy and Influence in GNP Programs	13.60*	.19		
Wave 1 Score			0.375*	0.08
Age			0.069	0.05
Attendance			-0.004*	0.00
Sense of Community	24.42*	.30		
Wave 1 Score			0.551*	0.07
Age			-0.073+	0.04
Attendance			0.000	0.00
Social Competence	15.89*	.22		
Wave 1 Score			0.389*	0.06
Age			0.031	0.03
Attendance			0.002*	0.00
Tobacco Use	3.29*	.05		
Wave 1 Score			0.123+	0.06
Age			0.058+	0.03
Attendance			-0.001	0.00
Alcohol Use	8.20*	.12		
Wave 1 Score			0.314*	0.07
Age			0.060	0.04
Attendance			0.001	0.00
Marijuana Use	3.50*	.06		
Wave 1 Score			0.304*	0.11
Age			0.018	0.04
Attendance			-0.001	0.00
Other Illicit Drug Use	0.52	.01		
Wave 1 Score			-0.024	0.07
Age			0.018	0.02
Attendance			-0.000	0.00

Table 8
Full Regression Models Predicting Outcomes by Amount Attendance at GNP (Continued)

Outcome	F-value	R-square (Proportion of Variance Explained)	Parameter Estimate	Standard Error
Huffing or Sniffing	0.23	.00		
Wave 1 Score			0.036	0.05
Age			0.006	0.02
Attendance			0.000	0.00
Yelling at Others	8.89*	.13		
Wave 1 Score			0.280*	0.07
Age			0.101*	0.05
Attendance			-0.001	0.00
Holding Hands with Others	22.98*	.28		
Wave 1 Score			0.374*	0.07
Age			0.251*	0.06
Attendance			0.001	0.00
Kissing	16.15*	.22		
Wave 1 Score			0.346*	0.07
Age			0.145*	0.05
Attendance			0.000	0.00
Being Touched Sexually	11.12*	.16		
Wave 1 Score			0.510*	0.10
Age			0.005	0.04
Attendance			-0.004*	0.00
Having Sex	0.18	.00		
Wave 1 Score			0.025	0.07
Age			0.001	0.02
Attendance			0.001	0.00

Note: * = $p < .05$
+ = $p < .10$
Attendance is measured by the number of days participating in the fourth year of GNP programming. Response scales were coded such that a higher score reflects a higher level of the concept of interest. Therefore, for all health risk behaviors, negative signs reflect lower levels at Wave 2 than Wave 1.

Next, we examined each outcome taking into account the number of grades the girls attended GNP as another estimate of the amount of GNP to which girls have been exposed. Table 9 reports these results. Only two statistically significant relationships were found for outcomes based on the number of school grades girls participated in GNP. The higher the number of grades girls participated in GNP, the higher they rated adult instrumental support. At the same time, however, the longer they were in GNP measured in grades, the lower they rated their self-worth.

The finding related to adult instrumental support is particularly important. The Center for Substance Abuse Prevention's primer on effective programs for youth highlights that a key aspect of successful prevention programs is promoting caring and supportive relationships between youth and adults, either parents or other community members (Brounstein & Zweig, 1999). Other recent studies have shown that parental support and connection is related to lower likelihood that youth will participate in health risk behaviors including substance abuse, unsafe sexual activity, and violence (Resnick et al., 1997; Zweig et al., in press). In sum, having adults on whom youth rely for support is important for their development.

The higher number of grades girls participated in GNP, the higher they rated adult instrumental support. In other words, the longer they were in GNP, the more adults they had to provide guidance, advice, and help.

The finding related to self-worth shows a negative relationship between participation in GNP and feelings of self-worth. However, it is important to note that girls' identities and self-perceptions are much more complex than simple scores of self-worth (Phillips, 1998). Some researchers argue that a single score can not capture important aspects of girls' identities and complex feelings of self-worth.

Table 9
Full Regression Models Predicting Outcomes by Number of Grades in GNP

Outcome	F-value	R-square (Proportion of Variance Explained)	Parameter Estimate	Standard Error
Sense of Belonging in GNP	33.97*	.35		
Wave 1 Score			0.572*	0.06
Age			0.040	0.04
Number of Grades in GNP			0.005	0.05
Sense of Safety in GNP	0.94	.01		
Wave 1 Score			0.113	0.07
Age			0.002	0.06
Number of Grades in GNP			-0.032	0.07
Adult Emotional Support	8.21*	.11		
Wave 1 Score			0.317*	0.07
Age			0.021	0.03
Number of Grades in GNP			0.021	0.03
Adult Instrumental Support	9.97*	.13		
Wave 1 Score			0.300*	0.06
Age			-0.004	0.03
Number of Grades in GNP			0.080*	0.03

Table 9
Full Regression Models Predicting Outcomes by Number of Grades in GNP (Continued)

Outcome	F-value	R-square (Proportion of Variance Explained)	Parameter Estimate	Standard Error
School Marks	26.83*	.31		
Wave 1 Score			0.654*	0.08
Age			-0.065	0.07
Number of Grades in GNP			-0.009	0.08
School Attendance	1.83	.03		
Wave 1 Score			0.136+	0.08
Age			-0.114	0.07
Number of Grades in GNP			0.045	0.10
Self-Efficacy	11.48*	.15		
Wave 1 Score			0.392*	0.07
Age			-0.031	0.03
Number of Grades in GNP			-0.042	0.04
Self-Worth	14.34*	.20		
Wave 1 Score			0.502*	0.08
Age			0.012	0.03
Number of Grades in GNP			-0.100*	0.04
Scholastic Competence	40.89*	.41		
Wave 1 Score			0.744*	0.07
Age			-0.035	0.03
Number of Grades in GNP			0.061	0.04
Social Acceptance	21.00*	.26		
Wave 1 Score			0.539*	0.08
Age			0.045	0.04
Number of Grades in GNP			-0.003	0.04
Sense of Autonomy and Influence in GNP Programs	12.56*	.17		
Wave 1 Score			0.391*	0.08
Age			0.090*	0.05
Number of Grades in GNP			-0.012	0.06
Sense of Community	26.21*	.29		
Wave 1 Score			0.556*	0.07
Age			-0.043	0.04
Number of Grades in GNP			-0.086	0.05
Social Competence	14.00*	.18		
Wave 1 Score			0.391*	0.06
Age			0.004	0.03
Number of Grades in GNP			0.017	0.04

Table 9
Full Regression Models Predicting Outcomes by Number of Grades in GNP (Continued)

Outcome	F-value	R-square (Proportion of Variance Explained)	Parameter Estimate	Standard Error
Tobacco Use	3.85*	.06		
Wave 1 Score			0.129*	0.06
Age			0.063+	0.03
Number of Grades in GNP			0.022	0.04
Alcohol Use	9.76*	.13		
Wave 1 Score			0.300*	0.06
Age			0.059	0.04
Number of Grades in GNP			0.011	0.05
Marijuana Use	3.93*	.06		
Wave 1 Score			0.344*	0.10
Age			0.017	0.04
Number of Grades in GNP			0.027	0.05
Other Illicit Drug Use	0.56	.01		
Wave 1 Score			-0.017	0.06
Age			0.019	0.02
Number of Grades in GNP			-0.002	0.02
Huffing or Sniffing	0.28	.00		
Wave 1 Score			0.030	0.04
Age			0.002	0.02
Number of Grades in GNP			0.014	0.02
Yelling at Others	13.39*	.17		
Wave 1 Score			0.342*	0.06
Age			0.106*	0.05
Number of Grades in GNP			0.034	0.06
Holding Hands with Others	27.52*	.30		
Wave 1 Score			0.410*	0.06
Age			0.204*	0.06
Number of Grades in GNP			0.115	0.07
Kissing	18.74*	.23		
Wave 1 Score			0.319*	0.06
Age			0.135*	0.05
Number of Grades in GNP			0.084	0.06
Being Touched Sexually	8.13*	.12		
Wave 1 Score			0.436*	0.09
Age			0.043	0.04
Number of Grades in GNP			-0.034	0.06

Table 9
Full Regression Models Predicting Outcomes by Number of Grades in GNP (Continued)

Outcome	F-value	R-square (Proportion of Variance Explained)	Parameter Estimate	Standard Error
Having Sex	0.45	.01		
Wave 1 Score			0.028	0.06
Age			-0.004	0.02
Number of Grades in GNP			0.027	0.03

Note: * = $p < .05$
+ = $p < .10$
Response scales were coded such that a higher score reflects a higher level of the concept of interest. Therefore, for all health risk behaviors, negative signs reflect lower levels at Wave 2 than Wave 1.

CONCLUSIONS

Although some mixed results were found, both qualitative and quantitative results show that GNP may have positively influenced girls' social, psychological, academic, and behavioral adjustment. Qualitative information from focus groups shows that girls reported they changed in positive ways as a result of participating in GNP. They reported developing more social skills and self-confidence and developing an interest in community service activities. To many girls GNP is a source of adult support other than their parents, a place that provides opportunity to learn and do things they would not otherwise do and to go places they would not otherwise go. Parents and GNP program staff also reported seeing positive changes in girls as a result of participating in GNP.

Many girls also reported positive levels of social, psychological, behavioral, and academic adjustment during both Wave 1 and Wave 2 survey assessments. Specifically, many girls who participated in GNP reported positive levels of social competence, self-worth, self-efficacy, social acceptance, and adult support, and low levels of health risk behaviors such as sexual activity and substance use. Girls changed in important ways during the fourth year of GNP programming. Specifically, girls reported higher levels of adult instrumental support, self-worth, and social acceptance at Wave 2 compared to Wave 1. In addition, the more girls were exposed to GNP the higher the levels of school attendance, social competence, and adult instrumental support the girls reported. Finally, the more girls were involved with GNP the less likely they were to report some sexual activities.

These findings indicate that GNP assists girls in living healthy lives and provides girls with important adult support and guidance. Having high self-worth and social competence, feeling accepted by peers, and having many adults to turn to when in need of help or advice are important indicators of positive adjustment for early adolescent girls.

CHAPTER 5
COMMUNITY PARTNERS

INTRODUCTION

Community agencies and organizations view youth development as a shared responsibility (The Future of Children, 1999). According to the National Research Council, high-quality youth serving programs are those which see themselves as partners in a larger service delivery network (National Research Council and Institute of Medicine, 2000). One objective of GNP is establishing links between multiple service agencies and creating a collaborative of agencies within the community's service network to provide activities and programs that meet the needs of girls ages 9 to 14. Collaborative service provision is important because a community's feeling of ownership is key to a program's long-term viability (Burt, Resnick, & Novick, 1998). One important aspect of a community's sense of ownership is the interaction of community members with the program as it tries to meet community needs (Burt et al., 1998).

The Community Partner Survey was conducted to examine the collaborative relationships GNP grantees have with other agencies within their service network. It provided an opportunity to learn about how GNP involves various community agencies in the program, how agencies interact with one another to meet the needs of girls ages 9 to 14, and whether these partnerships have met with success.

STUDY DESIGN

Survey Administration for Community Partner Survey

A number of steps were taken to administer surveys to GNP community partners. We asked each GNP Project Director to identify up to twenty agencies that have been partners in GNP programming. Directors included organizations from which GNP girls have been recruited, organizations that have been involved in any GNP programming or activities, organizations involved in donating resources to GNP, and others. GNP Project Directors authored cover letters that were tailored toward their partners to be included with the surveys. Each survey package that was sent from the Urban Institute contained a Community Partner Survey, a cover letter, and a self-addressed, postage-paid envelope. In total, 88 GNP partners were sent surveys. After two weeks, the GNP Project Directors contacted the remaining community partners that had not yet returned their surveys and requested that they complete the survey and return it to the Urban Institute. Fifty-six agencies eventually returned surveys (64 percent of the sample).

Description of Questions in the Community Partner Survey

We asked GNP partners about their experiences with the program. Questions included in the survey asked how partners heard of GNP, the process by which they became partners,

the nature of their interactions with GNP, the success of their partnership, the barriers to partnership, and the benefits of GNP for the community.

Sample

Across the four communities, 56 organizations and agencies that work directly with GNP in some capacity completed the Community Partner Survey. The types of organizations represented included general youth serving organizations, nongovernmental community service organizations, faith-based organizations, health agencies, schools, and others (See Table 10).

Table 10
Types of Organizations Partnering with the GNP program

Agency Type	N %
General Youth Serving Organization (e.g., community centers)	12 22%
Nongovernmental community service (e.g., youth advocacy centers)	11 20%
Church or other faith-based organization	2 4%
Health Agency (e.g., public health nurses)	7 13%
Foundation	1 2%
Government Agency (e.g., human services)	7 13%
School	7 13%
Public Safety Organization (e.g., law enforcement)	3 6%
Corporation/business (e.g., bookstore)	2 4%
Other	2 4%

The respondents from the partner agencies represented the following occupations:

- 22 youth serving community center employees;
- 4 grant administrators;
- 4 mental health therapists;
- 4 public health nurses or medical personnel (for example, nursing assistant and orthodontist);
- 3 law enforcement staff;
- 3 social workers or youth advocates;

- 3 school principals; and
- 13 others (for example, pastor, state representative, and educational consultant).

RESULTS

Community Partner Involvement

On average, the community partners reported that their agencies became involved in GNP three years ago or more. Specifically, 69 percent reported that the agency became involved in GNP three years ago or more, that is, close to the beginning of GNP. Another 18 percent reported their involvement began two years ago. The average length of time that a partner reported personally working or volunteering in a capacity in which they had an opportunity to interact with GNP was two years and nine months. Table 11 presents the distribution of the number of years partners have worked or volunteered with GNP. It shows that about 62 percent of the community partners have been working in some capacity with the GNP program for two or more years.

Table 11
Number of Years Partners have
Worked or Volunteered in a Capacity with GNP

Length of Time	Percent
A year or less	14%
One to Two Years	24%
Two to Three Years	34%
Three or more Years	28%

Community partners were asked to identify not only how long they have been working with the GNP program, but also how they first became involved in it. Participants of the Community Partner Survey identified a number of ways by which they first became involved in the GNP program. Several of the examples provided by the partners were idiosyncratic, but we were able to identify some themes from their responses. The most common themes cited were:

- Community meetings;
- GNP directly recruited their involvement;
- Partners themselves initiated contact with GNP; and
- Partners were among the original collaborating members of GNP.

Community Partner Interactions

We asked respondents to describe the kinds of interactions they had with the GNP program through an open-ended question. While participants' responses were especially positive about their interactions with the GNP program, many respondents did not specify

the type of interactions they have with the program. For those who did report the kinds of interactions they had with the program, the most frequently cited interactions were:

- Sharing information at meetings;
- Discussing program needs for GNP girls;
- Collaborating on events (for example, organizing community service projects);
- Providing education to the girls (for example, presenting information on feminine hygiene, dental care, and safe relationships); and
- Providing services to girls (for example, offering mental health counseling).

Ninety-one percent of community partners reported feeling like part of a team addressing the needs of girls ages 9 to 14.

Although qualitative answers were incomplete, Table 12 includes affirmative responses to a list of questions about how partners work with GNP. Partners work with GNP in many ways to provide programming and important resources. Eighty percent of the partners surveyed reported that they referred girls to the GNP program, 73 percent strategized together about new and creative ways to provide programs for girls ages 9 to 14, and 72 percent collaborated on special events. Between 45 and 57 percent of partners provided training, education, and other services (for example, counseling) directly to GNP girls. Twenty-four percent provided monetary donations to GNP and another 63 percent provided donations of other resources for GNP programming (for example, space and equipment). Most partners (91 percent) felt like they were a part of a team addressing the needs of girls ages 9 to 14 and many (78 percent) had established a mechanism with GNP by which they could assess if the partnership was working.

Ninety-five percent of community partners reported that their partnership with GNP was successful and it was necessary to providing effective services for girls.

On the whole, relationships with GNP partners are solid. When asked, 96 percent of the community partners surveyed reported that their relationship with other agencies involved in GNP had stayed the same or improved over the course of the GNP program. Only two programs reported that the relationship with other agencies involved in the GNP program had become worse. Ninety-five percent of the respondents reported that they felt they had been successful or very successful at building the partnership with GNP and 95 percent also believed that the partnership with GNP was necessary or very necessary to providing effective services and programs to girls ages 9 to 14.

Benefits and Barriers to Being a Partner with the Girl Neighborhood Power Program

Many respondents did not specifically address the questions on what the benefits were to being a partner with GNP. Instead, many respondents cited examples of how they believed the GNP program has had a positive impact on the community and girls ages 9

Table 12
Partnership Interactions with the Girl Neighborhood Power Program

Type of Interaction	Percent of Community Partners
Refer girls to the Girl Neighborhood Power Program.	80%
Provide training *to* Girl Neighborhood Power staff.	42%
Receive training *from* Girl Neighborhood Power staff.	26%
Have regularly scheduled meetings with Girl Neighborhood Power staff to share information.	62%
Strategize together about approaches to reach out to girls ages 9 to 14.	71%
Strategize together about new and creative ways to provide programs for girls ages 9 to 14.	73%
Have regular scheduled meetings with GNP staff to discuss how the program and service approaches.	56%
Have regular scheduled meetings with GNP staff to discuss how the program approaches are to be implemented.	50%
Share a joint mission statement.	35%
Receive money from GNP for services and programming that you provide.	31%
Give monetary donations to GNP.	24%
Give donations of in-kind services to GNP (for example, space and equipment).	63%
Feel like you are part of a team addressing the needs of girls ages 9 to 14.	91%
Collaborate on special events.	82%
Work with GNP staff or girls on a committee.	51%
Provide training to girls (for example, providing girls with skills).	54%
Providing education to girls (for example, health education and knowledge).	57%
Provide services to girls (for example, mental health counseling and health advocacy).	45%
Have regular mechanism to provide feedback to one another to ensure the partnership is working.	78%

to 14. From those partners who did report the benefits to partnering with the GNP program, the most common themes were:

- Making better referrals;
- Collaboration;
- Sharing resources;
- Optimizing services for children; and
- Working with girls ages 9 to 14.

One partner explained that being a partner with the GNP program "enables our two agencies to interact in a positive and meaningful manner to increase resources for youth in our community." Another partner reported that working with GNP provides an "opportunity to work and interact with girls who have the capacity to shape their destiny and impact the lives of others."

Sixty-two percent of community partners reported that they did not have any barriers to working with the GNP program.

Community partners were also asked to identify barriers to working with the GNP program. Sixty-two percent of the respondents reported that they did not have any barriers to working with the GNP program. Nevertheless, the most frequently cited barriers to working with GNP for the community partners were:

- Funding issues;
- Staff turnover;
- Transportation for the girls; and
- Personal time commitments.

One respondent commented that, "the GNP program(s) lack adequate funding and staff to regularly participate in community wide collaborative efforts." Furthermore, another partner explained that "long term projects have been difficult because of inconsistent staff."

Girl Neighborhood Power: Making a Difference in the Community

Eighty-two percent of the community partners surveyed reported that GNP had been helpful or very helpful in making them aware of the needs of teenage girls in their community. Moreover, 93 percent reported that GNP had been helpful or very helpful in working with them to meet the needs of teenage girls in the community and 98 percent believed that when it came to meeting the needs of teenage girls GNP was necessary or very necessary in the community. For example, one partner expressed that GNP "has given girls with no other support or resources the chance

Ninety-eight percent of community partners believed that when it came to meeting the needs of teenage girls, GNP was necessary or very necessary in the community.

to be a member of a group, [the chance] to learn about themselves, and [the chance] to grow in ways they may not otherwise have grown."

Eighty-two percent of community partners reported that GNP had been helpful in making them aware of the needs of teenage girls in their community.

When asked to describe how GNP had made a difference in the community indeed most community partners identified the safety and supervision of the girls in the community. Ninety-six percent believed that GNP was a safer place for girls to spend time compared to other places, some partners reported that "[GNP] provides a safe and thought provoking place for girls to grow towards leadership issues" and "[GNP] provides a safe haven for girls." GNP provided what many other quality out-of-school programs provide — a safe and protected environment (National Research Council and Institute of Medicine, 2000).

Besides offering a safe place for young girls, community partners also reported that they believe GNP:

- Increased self-esteem and leadership in girls; and
- Provided opportunities and options for a targeted age group.

One partner reported, "GNP has made a great difference for the young ladies, because it provides positive interactions and mentoring as well as activities and skills training." Another partner described GNP's impact on the community as "a positive experience for our community...[it] has actively involved girls in positive ways [and GNP] serves as a bridge and resource to many community programs for the girls."

Conclusions

Overall, the community partners who completed the survey perceived the GNP program as a valuable out-of-school program. Based on the survey responses, the community partners reported meaningful interactions with the GNP program in addition to indicating that GNP is a necessary partner to providing effective services and programs to girls ages 9 to 14. Despite some barriers to working with the GNP program (for example, funding issues and staff turnover), 62 percent of the community partners reported no barriers and reported positive aspects of being a partner with GNP. Repeatedly, partners reported that the GNP program is essential in the community. GNP is viewed as an important program, because it is one of the few neighborhood-based programs that provides not only a safe learning environment, but also reaches out to engage young girls, adults, and agencies in its programming.

CHAPTER 6
STUDY SUMMARY

POSITIVE OUTCOMES

GNP is an out-of-school program that positively influences the lives of the girls who participate in it. Like many youth development models, GNP attempts to not only decrease risk and vulnerability in girls' lives, but also seeks to enrich girls' lives in meaningful ways. To many girls it is a source of adult support other than their parents, a place that provides opportunity to learn and do things they would not otherwise do and to go places they would not otherwise go. These opportunities may also lay the groundwork for future adult roles and contributions to society.

Qualitative findings reveal that girls consider GNP an important context in which they interact. It is a context in which they feel they belong and feel supported by peers and adults. It is a place where girls can develop greater social skills and communication skills through their interactions with girls and the guidance of GNP program staff. Girls reported finding journaling useful and a way to express themselves. Girls also reported developing interest and enjoyment in participating in community service activities and developing leadership skills.

Many girls also reported positive levels of social, psychological, behavioral, and academic adjustment during both the Wave 1 and Wave 2 survey assessments. Specifically, many girls who participated in GNP reported positive levels of social competence, self-worth, self-efficacy, social acceptance, and adult support, and low levels of health risk behaviors such as sexual activity and substance use. Girls reported higher levels of adult instrumental support, self-worth, and social acceptance at Wave 2 compared to Wave 1, during the fourth year of programming. The more girls were involved with GNP the higher the levels of school attendance, social competence, and adult instrumental support the girls reported. In addition, the more girls were involved with GNP the less likely they were to report being touched sexually.[11] It is important to note, however, that other factors may have influenced the reported changes or may have obscured further positive findings, such as maturation.

GNP findings related to adult-youth relationships are very important. Positive and supportive relationships between adults and youth are related to lower participation in health risk behaviors and to higher levels of psychological adjustment (Resnick et al., 1997; Zweig et al., in press). Programs that have been shown to prevent or reduce substance use among youth and improve lives of adolescents often specifically attempt to

[11] It is important to note that answers to questions regarding being touched sexually and having sex may reflect unvoluntary and unwanted experiences. Although we did not specifically ask girls to report on such experiences, it is possible that some proportion of the sexual activities they do report are unwanted because the girls in the study range in age from 9 to 14. We include this reminder because we know that 74 percent of females who have sex before age 14 and 60 percent of females who have sex before age 15 report the experiences as involuntary (Alan Guttmacher Institute, 1994).

build caring and supportive relationships between youth and adults, whether the adults are parents or other community members (Brounstein & Zweig, 1999).

Overall, the community partners perceived the GNP program as a valuable out-of-school program. Based on survey responses, the community partners reported meaningful interactions with the GNP program such as strategizing together about approaches to reach out to girls and about new and creative ways to provide programs for girls, collaborating on special events, and referring girls to GNP. Most partners indicated that GNP is a necessary partner in providing effective services and programs. Despite some barriers to working with the GNP program (for example, funding issues and staff turnover), over half of the community partners reported no barriers and reported positive aspects of participating in a partnership with GNP. Repeatedly, partners reported that the GNP program is essential in the community. GNP is viewed as an important program, because it is one of the few neighborhood-based programs that provides not only a safe learning environment, but also reaches out to engage young girls, adults, and agencies in its programming.

Areas to Focus GNP Programming

Some findings point to areas in which GNP staff can focus their attention for further programming in federally funded communities or in replication of the program in new communities. Three specific areas could be targeted to improve efforts. First, in the survey, girls reported having lower levels of autonomy and influence over GNP programming the more they participated in the program. Girls in focus groups supported this finding by indicating they did not always want to participate in the activities GNP offered. Community grantees have worked to incorporate girls' feedback in programming and provide them with leadership and decision-making responsibilities when appropriate. Perhaps further efforts could increase girls' participation in designing programming and choosing areas of focus, especially for older girls who may have participated in the program for longer periods of time.

Second, a large number of girls reported yelling at others during both Wave 1 and Wave 2. It is not clear, however, in what context the girls are yelling at others. It may be that girls use yelling instead of physical fighting or that girls are yelling in order to express themselves. Although girls in focus groups reported learning conflict resolution skills at GNP, yelling seems to have remained at high levels for girls throughout the year. As a result, community grantees may want to continue to focus on programming that specifically teaches girls how to resolve conflict and deal with anger in more constructive ways.

Third, community grantees which offer GNP programming and those replicating GNP in other communities should attempt to address staff turnover within the program. GNP partners identified staff turnover as a barrier to successfully working with the program. Staff turnover interrupts the flow of programming and staff relationships with girls. Communities should consider ways to enhance staff experiences in order to increase the longevity of staff in direct service positions.

STUDY STRENGTHS AND LIMITATIONS

The current study has both strengths and weaknesses. The primary strength of the study is the use of both quantitative (surveys) and qualitative (focus groups) methodologies to examine how GNP assists girls in living healthy lives. Surveys included reliable and valid measures of psychological, social, academic, and behavioral adjustment, which have been used in a number of national evaluations of youth programs. Focus groups were used to help illustrate quantitative findings, as well as tap into information and concepts that were not reflected in the surveys. Another strength is that attrition between Wave 1 and Wave 2 did not introduce significant observable bias into the sample.

While we have learned a great deal about GNP programming from the national study, the study is limited in a number of ways that makes it impossible to assess program impacts fully. First, in general, it is difficult to evaluate youth development and out-of-school programming for adolescents with varying levels of structure, form, and function (National Research Council and Institute of Medicine, 2000) and GNP is no exception. These programs generally have complex and different goals and objectives while working with the same philosophy of providing activities and services to youth. While GNP does provide core program elements, the sites also provide many different and unique programs, making it a challenge to study such a program. Community grantees included different types of youth serving organizations (for example, Girls Incorporated, YWCA, Girl Scouts) which, although all part of GNP, have varying goals and objectives. Community grantees also varied in structure and number of participants (see Appendix A).

In addition, GNP community grantees varied on the extent to which they valued particular goals or outcomes related to their programming. This is evident by the variation in the amount of programming on particular topics from community to community. Evaluations of similar programs have also demonstrated such differences and the variation in the goals and desired outcomes of programs may exist between program directors and program staff as well (National Research Council and Institute of Medicine, 2000).

Further, GNP communities varied in the level of relationship they had with parents in the program. Therefore, some community grantees had less success recruiting parents for focus groups and compelling parents to complete surveys than other grantees. Finally, community grantees varied in the amount of mobility of the girls who attended GNP. In some communities, girls moved frequently and discontinued their attendance at GNP, which made it difficult to find them for Wave 2 assessments.

Second, the current study is limited because it has no comparison group, therefore making it difficult to attribute any changes in girls specifically to the GNP programming. Evaluators of after-school/youth development programs are under a great deal of pressure to demonstrate the impact of such programs and it is very difficult to attribute the outcomes from an evaluation to the program (National Research Council and Institute of Medicine, 2000). The current study did not have a comparison group for two reasons: lack of funding and the challenge of finding appropriate comparison group girls. Without

a comparison group, it is difficult to attribute changes in girls to GNP. The changes may indeed be due to other influences such as maturation.

Third, the Wave 1 assessment did not occur prior to attendance for *most* girls in the study. Most of the girls in the study have been attending GNP for multiple grades (78 percent). Only 22 percent had only been in GNP for one year at the time of Wave 1. Therefore, for only these girls does Wave 1 actually reflect an assessment prior to participation in the program.

The timing of the study was dependent on when the research team was brought into the program to design and conduct the study and the funds that were available to do so. As a result, the study began at the start of the fourth year of programming and is limited to that year. There is no way to account for the effects that GNP may have had on girls before participating in the study. Perhaps the most positive effects had already occurred for girls, therefore elevating Wave 1 scores and leaving little room for improvement at Wave 2. Alternatively, any long lasting negative effects also could not be assessed accurately.

Fourth, the current study included only two assessments. The outcomes of such programs are often difficult to identify in the short term (Burt et al., 1998) and perhaps a greater number of assessments would have shown greater effects of GNP programming. Evaluations and studies of programs should assess both the short and long term effects.

Fifth, GNP is a voluntary program. The girls who are motivated to attend may already be resilient, well-adjusted girls despite living in low-income communities. Indeed, descriptive results indicate that girls attending GNP reported healthy lifestyles during both Wave 1 and Wave 2 assessments. Without a comparison group, it is unclear whether the girls would be as high functioning without participating in GNP. As a result, the study may be prone to selection bias because the girls chose to attend the program.

CONCLUSION

GNP is an out-of-school program that enriches the lives of girls ages 9 to 14. It provides girls with opportunities for growth and positive change. It assists girls living in low-income neighborhoods by providing adult supports, positive peer interaction, and exposure to community service, career building, and knowledge they would not otherwise have. As one parent remarked, "[GNP] is a building block to make [the girls] good adults." One girl sums up much of the sentiment we heard during this study — "[GNP] is a great, great, great thing."

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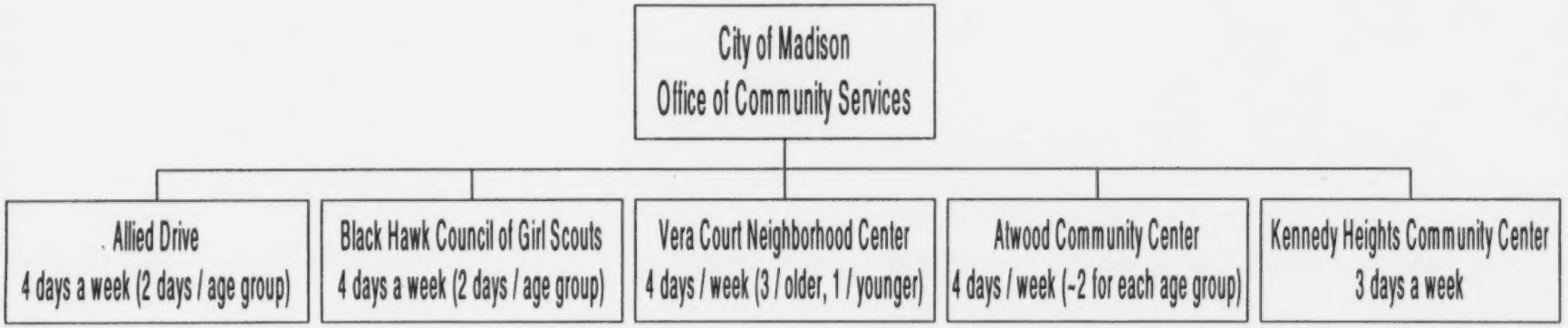
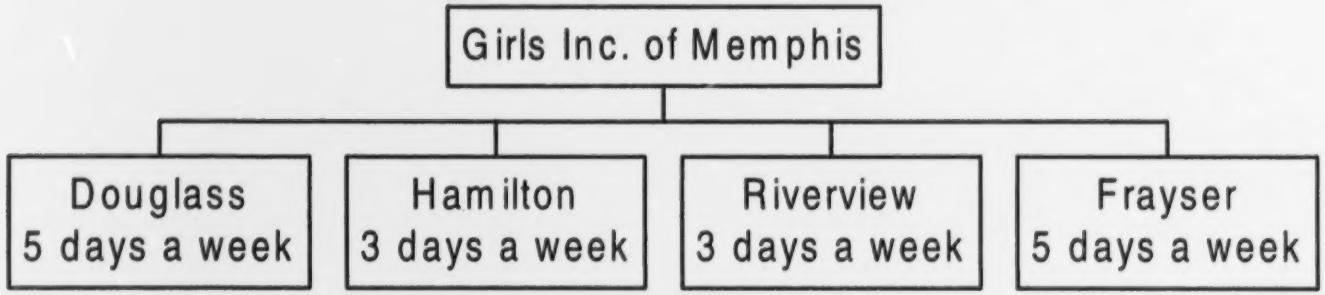
APPENDIX A
FIGURES OF COMMUNITY GRANTEE STRUCTURES

Figure 1: Madison, WI


City of Madison
Office of Community Services
Allied Drive
4 days a week (2 days / age group)
Black Hawk Council of Girl Scouts
4 days a week (2 days / age group)
Vera Court Neighborhood Center
4 days / week (3 / older, 1 / younger)
Atwood Community Center
4 days / week (~2 for each age group)
Kennedy Heights Community Center
3 days a week

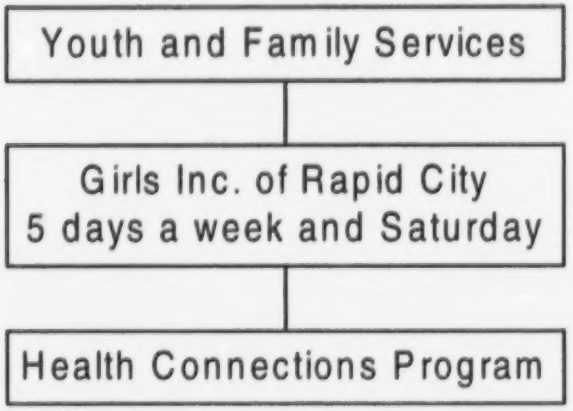
The City of Madison's Office of Community Services is the grantee and subcontracts with community center sites to provide programming to girls.

Figure 2: Memphis, TN



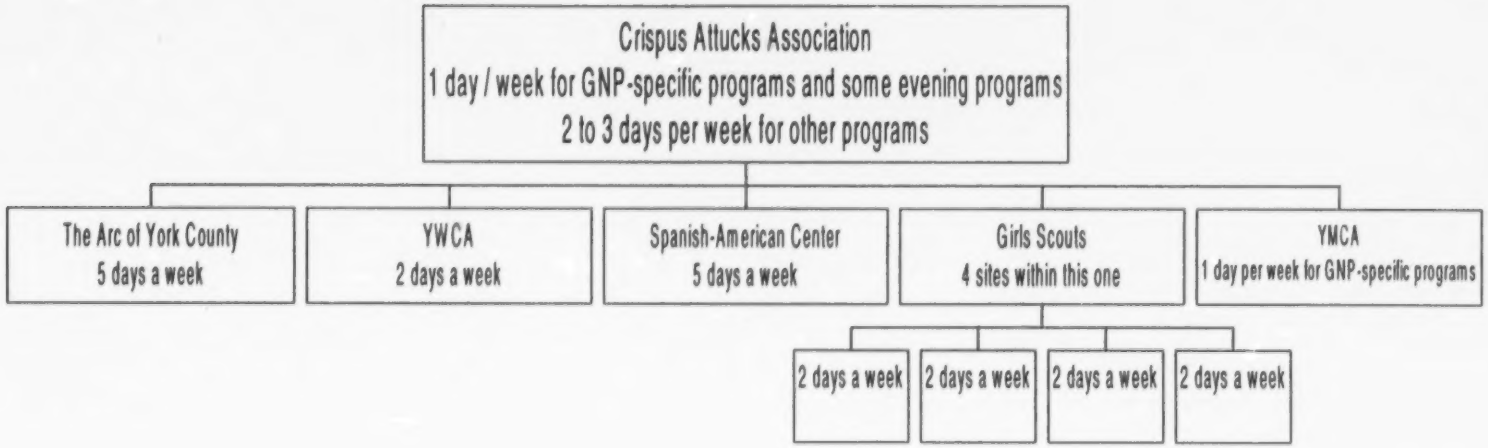
Girls Inc. of Memphis is the community grantee that has developed GNP programming sites in four low-income neighborhoods.

Figure 3: Rapid City, SD



Girls Inc. of Rapid City is one component of Youth and Family Services and is the setting for GNP programming.

Figure 4: York, PA


Crispus Attucks Association
1 day / week for GNP-specific programs and some evening programs
2 to 3 days per week for other programs
The Arc of York County
5 days a week
YWCA
2 days a week
Spanish-American Center
5 days a week
Girls Scouts
4 sites within this one
YMCA
1 day per week for GNP-specific programs
2 days a week
2 days a week
2 days a week
2 days a week

Crispus Attucks, a youth-serving community center in York, is the community grantee for York. In addition to providing GNP programming,this organization reimburses other community agencies for conducting GNP programming.

APPENDIX B
MEASURES IN THE SURVEY FOR GIRLS

This section provides background information about the measures included in the Survey for Girls. The measures were included based on a number of common elements.

First, the measures were chosen based on feedback from the community grantees during visits at the design phase of the study. GNP program staff, GNP girls, GNP parents, teachers and guidance counselors from the community, and staff from the Maternal and Child Health Bureau from the US Department of Health and Human Services provided feedback about what is important to assess in the national study of GNP.

Second, all of the measures listed below have been used in national evaluations that included thousands of girls similar to those in GNP. The multi-site evaluations included girls from low-income neighborhoods, from within the same age range, from within a variety of racial and ethnic groups, and who participated in youth development programs (for example, Boys & Girls Clubs, Girls Incorporated, and the YMCA). These measures have been validated in national evaluation studies conducted by prominent evaluation firms such as Public/Private Ventures (P/PV) in Philadelphia, Pennsylvania and the Developmental Studies Center in Oakland, California. (Measures adapted and used from P/PV are public use. No further permission is required. Measures adapted from the Developmental Studies Center require permission to use. Appendix C includes a copy of the letter granting permission for use in the GNP study.)

Third, each of the measures below represents an aspect of a healthy lifestyle. They attempt to capture psychological adjustment, as well as academic, social, and behavioral adjustment.

For each measure with multiple items to capture one construct, we report Cronbach alpha estimates of internal consistency (sense of belonging in GNP, adult emotional support, adult instrumental support, self-efficacy, self-worth, scholastic competence, social acceptance, sense of autonomy and influence in GNP, sense of community, and social competence). In addition, scale scores were created for measures with more than one item based on the mean of the items for the scale that were not missing. A scale score was generated for individual girls only if they answered at least 75% of the items included in the measure.

SENSE OF BELONGING IN GNP

GNP provides a context in which girls feel like they "belong" (Zweig, 2000). Youth have a sense of belonging in situations where others value their contributions and time spent together (Gambone & Arbreton, 1997). A sense of belonging is important to adolescents' sense of self and promotes a greater sense of responsibility and positive attitudes (Gambone & Arbreton, 1997).

The original scale includes 12 items that capture how often youth feel connected to the program in which they belong. The response scale ranges from Never (1) to All of the time (5). Higher scores on this scale reflect higher levels of feelings of belonging in GNP. P/PV has successfully used an adapted version of the scale that includes only seven items (Gambone & Arbreton, 1997). The seven item scale was used in the current study and was internally consistent: alpha=.86 at Wave 1 and alpha=.88 at Wave 2.

The items are:

1. I feel like I belong here.
2. I feel like my ideas count here.
3. People really listen to me here.
4. I feel like I am successful here.
5. This place is a comfortable place to hang out.
6. I feel like I matter here.
7. If I didn't show up, someone here would notice I was not around.

Safety

Parents of girls in GNP identified safety, and the idea that their daughters were in a safe environment, as one important aspect of GNP programming (Zweig, 2000). Safety can be measured using one item assessing girls' perception of safety at GNP as compared to other environments (Gambone & Arbreton, 1997). Higher scores on this item reflect greater feelings of safety at GNP.

The item is:

Compared to other places where you spend time, how safe do you feel when you are at Girl Neighborhood Power?

_____ 1. A lot less safe compared to other places
_____ 2. A little less safe compared to other places
_____ 3. Just as safe as other places
_____ 4. A little more safe compared to other places
_____ 5. A lot more safe compared to other places

Adult Support

According to GNP parents, GNP programming provides girls with another positive adult role model besides themselves (Zweig, 2000). The more adults who show an adolescent that they care, who serve as a positive role model to youth, and who provide support and guidance, the more likely youth will be able to avoid serious problems and make sound decisions (Brounstein & Zweig, 1999; Sipe, Ma, & Gambone, 1998). P/PV has used a measure of adult support, both Emotional and Instrumental Support with a response scale ranging from None (0) to More than three (3). Higher scores on this scale reflect greater

numbers of adults who supported the youth. For the current study, the emotional support scale had only moderate internal consistency: alpha=.59 at Wave 1 and alpha=.63 at Wave 2. The instrumental support scale also had only moderate internal consistency: alpha=.61 at Wave 1 and alpha=.68 at Wave 2.

The items are as follows:

How many adults.....

Emotional Support

1. Pay attention to what's going on in your life?
2. Get on your case if you mess up or make a mistake?[12]
3. Say something nice when you do something good?
4. Could you go to if you are really upset or mad about something?

Instrumental Support

5. Could you go to for help in an emergency?
6. Could you go to if you need some advice about personal problems, like a problem with a boyfriend?
7. Could you go to if you felt physically threatened? For example, if someone was going to hit you or beat you up?
8. Could you go to for help with schoolwork?

ACADEMIC PERFORMANCE

Each of the four GNP community grantees reported an interest in assessing girls' school marks and attendance records (Zweig, 2000). Two items (Tierney, Grossman, & Resch, 1995) were included in both the survey for the girls and the survey for their parents to capture school marks and attendance.

The items are as follows:

1. Which of the following best describes your grades? Mostly.....
   _____ 1. D's and F's
   _____ 2. D's
   _____ 3. C's and D's
   _____ 4. C's
   _____ 5. B's and C's
   _____ 6. B's

[12] This item was not included in the computation to create the scale score of emotional support because it adversely affected the alpha indicating girls were answering this question differently than the other items in the scale.

_____ 7. A's and B's
_____ 8. A's

2. How often do you miss a day of school? Do not include school holidays or other days when school is closed.

_____ 1. More than once a week
_____ 2. About once a week
_____ 3. Two or three days a month
_____ 4. One day a month
_____ 5. About five to nine days a school year
_____ 6. Less than five days a year

SELF-EFFICACY

Each of the four GNP community grantees reported an interest in assessing the girls' self-efficacy, or self-esteem and self-confidence, during the national study (Zweig, 2000). Specifically, self-efficacy has been promoted as a positive outcome of youth development programs (Catalano et al., 1999). Self-efficacy is a youth's belief in herself and in her capability to accomplish goals. One of the primary ways that programs can increase youths' feeling of control over their lives and capabilities is to provide them with leadership and decision-making opportunities (Sipe, Ma, & Gambone, 1998).

Sipe et al. (1998) used a 16 item scale to measure self-efficacy. The response scale ranges from Strongly disagree (1) to Strongly agree (4). Because some GNP girls are younger than age 12, response scales were changed to be similar to other measures of agreement in the study and ranged from Disagree a lot (1) to Agree a lot (5). Six items in the scale reflect positive statements about self-efficacy and ten items in the scale reflect negative statements. The ten items that are negative were reverse coded before conducting statistical analysis, such that higher scores reflect higher levels of self-efficacy. The items that were reverse coded are noted below with an (Rev.). For the current study, the self-efficacy scale was internally consistent: alpha=.69 at Wave 1 and alpha=.75 at Wave 2.

The items are:[13]

1. When I make plans, I am sure I can make them work.
2. One of my problems is that I cannot get down to work when I should. (Rev.)
3. If I can't do a job the first time, I keep trying until I can.
4. When I set important goals for myself, I almost never achieve them. (Rev.)
5. I give up on things before finishing them. (Rev.)
6. I avoid facing problems. (Rev.)
7. If something looks too hard, I will not even bother to try it. (Rev.)

[13] The items marked with (*) were not included in the Wave 2 survey and are therefore not included in the computations to create the scale scores.

8. When I have something unpleasant to do, I stick to it until I finish it.
9. When I try to learn something new, I give up if I'm not successful at first. (Rev.)*
10. I handle unexpected problems very well.*
11. When things look too hard, I don't try to learn them. (Rev.)*
12. Failure just makes me try harder.
13. I am unsure about my ability to do things. (Rev.)
14. I can depend on myself.
15. I give up easily. (Rev.)
16. I do not seem able to deal with most problems that come up. (Rev.)

SELF-WORTH

Each of the four GNP community grantees reported an interest in assessing the girls' self-worth, self-esteem, or self-confidence (Zweig, 2000). In addition, girls reported having greater confidence after participating in GNP programs (Zweig, 2000). A measure of self-worth was included to capture this. Self-worth is a person's acceptance of herself and belief that she is as good a person as others. Harter (1985) designed a measure of self-worth that has been used in other national evaluations (Tierney, Grossman, & Resch, 1995).

The self-worth scale includes six items that describe different kinds of kids. Girls chose which type of kids they were more like. Then girls reported if being like the group they chose was "sort of true" for them or "really true" for them. Items that were reverse coded are marked with (Rev.). For the current study, the internal consistency of the scale was adequate: alpha=.63 at Wave 1 and alpha=.76 at Wave 2.

The items are:

1. Which group sounds more like you?
   Some kids are often unhappy with themselves..... Other kids are pretty pleased with themselves.....
2. Which group sounds more like you? (Rev.)
   Some kids are very happy being the way they are..... Other kids wish they were different.....
3. Which group sounds more like you?
   Some kids don't like the way they are leading their life..... Other kids do like the way they are leading their life...
4. Which group sounds more like you?
   Some kids are not happy with the way they do a lot of things..... Other kids think the way they do things is fine.....
5. Which group sounds more like you? (Rev.)
   Some kids are usually happy with themselves as a person..... Other kids are often not happy with themselves.....
6. Which group sounds more like you? (Rev.)
   Some kids like the kind of person they are..... Other kids often wish they were someone else.....

SCHOLASTIC COMPETENCE

A sub-set of the four GNP community grantees reported an interest in assessing academic performance during the national study of GNP (Zweig, 2000). Scholastic competence is a person's belief that she is academically capable. In addition to the academic performance measures already described, we included a measure of scholastic competence. Harter (1985) designed a measure of scholastic competence that has been used in other national evaluations (Tierney, Grossman, & Resch, 1995).

The scholastic competence scale includes six items that describe different kinds of kids. Girls chose which type of kids they were more like and then reported if being like the group they chose was "sort of true" for them or "really true" for them. Items that were reverse coded are marked with (Rev.). For the current study, the internal consistency of the scale was high: alpha=.71 at Wave 1 and alpha=.82 at Wave 2.

The scale is as follows:

1. Which group sounds more like you? (Rev.)
   Some kids feel that they are very good at their schoolwork..... / Other kids worry about whether they can do the schoolwork assigned to them..
2. Which group sounds more like you? (Rev.)
   Some kids feel like they are just as smart as other kids their age..... / Other kids aren't so sure and wonder if they are as smart...
3. Which group sounds more like you?
   Some kids are pretty slow in finishing their schoolwork..... / Other kids can do their schoolwork quickly.....
4. Which group sounds more like you?
   Some kids often forget what they learn..... / Other kids remember things easily.....
5. Which group sounds more like you? (Rev.)
   Some kids do very well at their classwork..... / Other kids don't do well at their classwork.....
6. Which group sounds more like you?
   Some kids have trouble figuring out answers in school..... / Other kids can almost always figure out the answers.....

SOCIAL ACCEPTANCE

GNP girls reported that GNP was an important context to meet new people and make friends (Zweig, 2000), therefore a measure of social acceptance has been included in the study design (Zweig, 2000). Social acceptance is a person's belief that she is accepted and well-liked by her peers. Harter (1985) designed a measure of social acceptance that has been used in other national evaluations (Tierney, Grossman, & Resch, 1995).

The social acceptance scale includes six items that describe different kinds of kids. Girls chose which type of kids they were more like and then reported if being like the group they chose was "sort of true" for them or "really true" for them. Items that were reverse coded are marked with (Rev.). For the current study, the internal consistency of the scale was adequate: alpha=.69 at Wave 1 and alpha=.78 at Wave 2.

The scale is as follows:

1. Which group sounds more like you?	
Some kids would like to have a lot more friends.....	Other kids have as many friends as they want.....
2. Which group sounds more like you? (Rev.)	
Some kids are always doing things with a lot of kids.....	Other kids usually do things by themselves.....
3. Which group sounds more like you?	
Some kids find it hard to make friends.....	Other kids find it's pretty easy to make friends.....
4. Which group sounds more like you?	
Some kids wish that more people their age liked them.....	Other kids feel that most people their age do like them.....
5. Which group sounds more like you? (Rev.)	
Some kids have a lot of friends.....	Other kids don't have very many friends.....
6. Which group sounds more like you? (Rev.)	
Some kids are popular with others their age.....	Other kids are not very popular.....

Sense of Autonomy and Influence in GNP Programs

One of the goals of GNP is to create an environment in which girls can act as leaders and contribute to the direction of the program. The Developmental Studies Center (1995) developed a measure of autonomy and influence in the classroom for children in grades 3 through 6 to measure "the degree to which students feel they have the opportunity to participate in classroom planning and decision-making."

We have adapted the measure to be shorter than the original and to assess the degree to which GNP participants feel they influence program planning rather than classroom planning. The response scale ranges from Never (1) to All of the time (5). Higher responses on this scale reflect a greater sense of autonomy and influence over GNP programming. This measure had adequate internal consistency: alpha=.61 at Wave 1 and alpha=.73 at Wave 2.

The scale is as follows:

1. In GNP the girls have a say in deciding what goes on.

2. The GNP staff let us do things our own way.
3. In GNP, the staff and girls decide together what the rules will be.
4. Girls in GNP can get a rule changed if they think it is unfair.
5. In GNP the staff and girls together plan what we will do.[14]

SENSE OF COMMUNITY

One of the goals of GNP is to create a connection between girls and their neighborhoods and communities. The Developmental Studies Center (1995) developed a measure of school as a community to assess the "degree to which students feel their school as a whole is supportive, welcoming, and safe." Instead of assessing the school community, we have adapted the measure to assess the degree to which GNP participants feel a sense of community in the neighborhood in which they live. The response scale ranges from Disagree a lot (1) to Agree a lot (5). Higher scores on this scale reflect a greater sense of community. Statements that were reverse coded are indicated with (Rev.). This measure had high internal consistency; alpha=.83 at Wave 1 and alpha=.87 at Wave 2.

The items are:

1. People who live in my neighborhood really care about each other.
2. People who live in my neighborhood are willing to go out of their way to help someone.
3. People who live in my neighborhood treat each other with respect.
4. People who live in my neighborhood don't seem to like each other very well. (Rev.)
5. People who live in my neighborhood are just looking out for themselves. (Rev.)
6. My neighborhood is like a family.
7. When I am having a problem, someone in my neighborhood will help me.
8. People in my neighborhood help each other, even if they are not friends.

SOCIAL COMPETENCE

A commonly reported interest among GNP program staff was the degree to which they help girls build interpersonal, conflict resolution, and communication skills (Zweig, 2000). The Developmental Studies Center (1995) developed a measure of social competence which allows youth to rate their own social skills.

The response scale for the social competence measure ranges from Disagree a lot (1) to Agree a lot (5). Higher scores on this scale reflect higher self-perception of social skills. Statements that were reverse coded are indicated with (Rev.). This measure was internally consistent; alpha=.75 at Wave 1 and alpha=.70 at Wave 2. Also, the measure was adapted and included in the survey for parents, so they could rate their daughters' social competence (alpha=.83 at Wave 1 and alpha=.81 at Wave 2).

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[14] This item was not included in the Wave 2 survey and is therefore not included in the computation to create the scale score.

The scale is as follows:

1. I can always cheer up someone who is feeling sad.
2. I can always find a way to help people end arguments.
3. I listen carefully to what other people say to me.
4. I'm good at taking turns, and sharing things with others.
5. It's easy for me to make suggestions without being bossy.
6. I'm very good at working with other children.
7. I always know when people need help, and what kind of help to give.
8. I know how to disagree without starting a fight or argument.[15]
9. I'm not very good at helping people. (Rev.)
10. I'm good at finding fair ways to solve problems.

Adolescent Health Risks

During visits, GNP program staff expressed an interest in assessing if youth are taking health risks, such as participating in substance use, sexual behavior, and violence (Zweig, 2000). The Rapid City GNP community grantee has successfully asked their GNP girls about substance use, sexual activity, and violence using two measures designed by the Institute for Educational Leadership & Evaluation (Usera, 1999). The two measures were combined and adapted for the current study. The response scale ranges from Never (0) to 3 or more times (3).

The questions are as follows:[16]

In the last 6 months:

1. I have used tobacco (cigarettes, chew, cigar)
2. I have yelled at someone.
3. I have held hands with another person.
4. I have had an alcoholic drink (beer, wine, etc.) with my peers (friends) or alone. (Do not include religious ceremonies.).
5. I have had sex with another person.
6. I have gone on dates with another person.*
7. I have gotten into a physical fight with someone.*
8. I have kissed another person.
9. I have used marijuana (pot).
10. I have used other drugs (meth, coke, dust, etc.).
11. I have been touched sexually by another person.
12. I have huffed or sniffed.

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[15] This item was not included in the Wave 2 survey and is therefore not included in the computation to create the scale score.

[16] The items marked with (*) were not included in the Wave 2 survey.

APPENDIX C
LETTER OF PERMISSION

Developmental Studies Center

2000 Embarcadero, Suite 305
Oakland, CA 94606-5300
(510) 533-0213
FAX (510) 464-3670

January 31, 2000

Dr. Janine Zweig
The Urban Institute
2100 M Street, N.W.
Washington, DC 20037

Dear Dr. Zweig;

We are in receipt of your letter dated January 5, 2000. Please accept this letter as permission to use our survey instrument, if deemed appropriate, in your evaluation of Girl Neighborhood Power.

Enclosed is another copy of our *Scales from Student Questionnaire, Child Development Project* for you to share with the GNP team.

If you have any questions, please feel free to contact us at your convenience.

Sincerely,

A.J. Craft
Assistant to Dr. Eric Schaps

Encl.: *Scales from Student Questionnaire, Child Development Project*